## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003499

**Entity Name: ATAIN INSURANCE COMPANY** 

**Current Principal Place of Business:** 

30833 NORTHWESTERN HWY.

SUITE 220

FARMINGTON HILLS, MI 48334

**Current Mailing Address:** 

30833 NORTHWESTERN HWY.

SUITE 220

FARMINGTON HILLS, MI 48334

FEI Number: 31-1674992 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST.

TALLAHASSEE, FL 32399 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Address

Electronic Signature of Registered Agent

Date

**FILED** Mar 10, 2016

Secretary of State

CC1425258055

Officer/Director Detail:

Title **PRESIDENT** Title VP, TREASURER, CFO

Name BATES, WAYNE A Name MARTIN, MICHAEL O

> 30833 NORTHWESTERN HWY. Address 30833 NORTHWESTERN HWY. SUITE 220 SUITE 220

City-State-Zip: FARMINGTON HILLS MI 48334 City-State-Zip: FARMINGTON HILLS MI 48334

SECRETARY, DIRECTOR Title VP, DIRECTOR Title HECKEL, MARILYN A PRICE, DAVID J Name Name

30833 NORTHWESTERN HWY. 30833 NORTHWESTERN HWY. Address Address

SUITE 220 SUITE 220

City-State-Zip: FARMINGTON HILLS MI 48334 City-State-Zip: FARMINGTON HILLS MI 48334

Title VP, DIRECTOR Title CEO, DIRECTOR

Name CARSON, DONALD R Name MULDOWNEY, DANIEL T

30833 NORTHWESTERN HWY. Address 2301 E. LAMAR BOULEVARD, 5TH Address

**FLOOR** SUITE 220

City-State-Zip: ARLINGTON TX 76006 City-State-Zip: FARMINGTON HILLS MI 48334

Title Title **DIRECTOR** 

Name MANUELIDIS, EMMANUEL E Name KAUFMAN, ALAN J

30833 NORTHWESTERN HWY. 30833 NORTHWESTERN HWY. Address Address

SUITE 220 SUITE 220

FARMINGTON HILLS MI 48334 City-State-Zip: FARMINGTON HILLS MI 48334 City-State-Zip:

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL O. MARTIN

SR. VP, TREASURER &

03/10/2016

CFO

## Officer/Director Detail Continued:

Title DIRECTOR

Name SHAEVSKY, MARK

Address 30833 NORTHWESTERN HWY.

SUITE 220

City-State-Zip: FARMINGTON HILLS MI 48334

Title DIRECTOR

Name DAVIS, JODIE K

Address 30833 NORTHWESTERN HWY.

SUITE 220

City-State-Zip: FARMINGTON HILLS MI 48334

Title DIRECTOR

Name KAUFMAN, DANIEL J

Address 30833 NORTHWESTERN HWY.

SUITE 220

City-State-Zip: FARMINGTON HILLS MI 48334