

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002302

FILED
Mar 31, 2014
Secretary of State
CC3833496128

Entity Name: BROOKS INSURANCE AGENCY, INC.

Current Principal Place of Business:

1120 MADISON AVENUE
TOLEDO, OH 43604

Current Mailing Address:

1120 MADISON AVENUE
TOLEDO, OH 43604

FEI Number: 34-4194540

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR., SUITE A
TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CP
Name JOHNSON, DENNIS
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title D
Name JOHNSON, SHEILA
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title VP
Name MIKOLAJCZAK, KATHERINE
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title VPT
Name JOHNSON, PAUL
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title D
Name JOHNSON, WILLIAM
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title VP
Name BROWN, BEN
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title SR. VP
Name KEVIN, BRENNAN
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title SECRETARY
Name HECKLINGER, SANDY
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

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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: KATHERINE MIKOLAJCZAK

VICE PRESIDENT

03/31/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name CONNORS, MARTY
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title SR. VP
Name STENGLE, JIM
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604

Title VP
Name LORTIE, JIM
Address 1120 MADISON AVENUE
City-State-Zip: TOLEDO OH 43604