

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 27, 2016
Secretary of State
CC9107325831

Entity Name: PLACER INSURANCE AGENCY, INC.

Current Principal Place of Business:

1100 LOCUST STREET
DES MOINES, IA 50391-1100

Current Mailing Address:

1100 LOCUST STREET
DES MOINES, IA 50391-1100 US

FEI Number: 39-1907217

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 VP, TREASURER
Name CROSSER , WENDELL P.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name BERVEN, MARK A
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name LEACH, MICHAEL P
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title VP, SECRETARY
Name HORNER, ROBERT W III
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title PRESIDENT, DIRECTOR
Name FREIBERG, SABRINA G.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title ASSOCIATE VICE PRESIDENT
Name KINDELT, KIRK M
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title SENIOR VICE PRESIDENT
Name BIESECKER, PAMELA A
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title ASSOCIATE VICE PRESIDENT AND ASSISTANT SECRETARY
Name HARTMAN, MARK E.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

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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: ROBERT W. HORNER, III

SECRETARY

04/27/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSOCIATE VICE PRESIDENT AND ASSISTANT
SECRETARY
Name RICHARDS, KATHY R.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title ASSOCIATE VICE PRESIDENT AND
ASSISTANT SECRETARY
Name SHAH, PARAG H.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215