

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000005997

**Entity Name:** HAUSMANN-JOHNSON INSURANCE, INC.

**Current Principal Place of Business:**

740 REGENT STREET  
MADISON, WI 53715

**Current Mailing Address:**

POST OFFICE BOX 259408  
MADISON, WI 53725-9408

**FEI Number:** 39-1090217

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CHAIRMAN  
Name HAUSMANN, TIMOTHY  
Address 740 REGENT STREET  
City-State-Zip: MADISON WI 53715

Title PRESIDENT  
Name RICHTER, BARRY  
Address 740 REGENT STREET  
City-State-Zip: MADISON WI 53715

Title DS  
Name BUTLER, CRAIG  
Address 740 REGENT STREET  
City-State-Zip: MADISON WI 53715

Title T  
Name HASZ, SANDRA  
Address 740 REGENT STREET  
City-State-Zip: MADISON WI 53715

*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: SANDRA HASZ**

**TREASURER**

**02/06/2020**

Electronic Signature of Signing Officer/Director Detail

Date