

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000007709

**Entity Name:** ONECIS INSURANCE COMPANY

**Current Principal Place of Business:**

4343 COMMERCE COURT STE. 120  
LISLE, IL 60532

**FILED**  
**Mar 07, 2018**  
**Secretary of State**  
**CC3457267812**

**Current Mailing Address:**

1601 SAWGRASS CORPORATE PARKWAY  
STE. 400  
FORT LAUDERDALE, FL 33323 US

**FEI Number:** 36-2738349

**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           DIRECTOR  
Name           FORBES, JASON  
Address        1601 SAWGRASS CORPORATE  
                  PARKWAY  
City-State-Zip: FT LAUDERDALE FL 33323

Title           CFO, TREASURER  
Name           DAMASCENO, LUIS  
Address        1601 SAWGRASS CORPORATE  
                  PARKWAY  
                  STE. 400  
City-State-Zip: FORT LAUDERDALE FL 33323

Title           SEC  
Name           BUSH, HEATHER  
Address        1601 SAWGRASS CORPORATE  
                  PARKWAY  
City-State-Zip: FT LAUDERDALE FL 33323

Title           PRESIDENT  
Name           MONDELLO, JANICE  
Address        330 LYNNWAY, SUITE 403  
City-State-Zip: LYNN MA 01901

Title           DIRECTOR  
Name           BELSKI, EDWARD  
Address        1601 SAWGRASS CORPORATE  
                  PARKWAY  
                  STE. 400  
City-State-Zip: FORT LAUDERDALE FL 33323

Title           DIRECTOR  
Name           MOMSEN, RAYMOND  
Address        1601 SAWGRASS CORPORATE  
                  PARKWAY  
                  STE. 400  
City-State-Zip: FORT LAUDERDALE FL 33323

*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: HEATHER BUSH**

**SECRETARY**

**03/07/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date