

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000788

Entity Name: ACCIDENT FUND INSURANCE COMPANY OF AMERICA

Current Principal Place of Business:

200 N GRAND AVENUE
LANSING, MI 48933

Current Mailing Address:

PO BOX 40790
LANSING, MI 48901-7990

FEI Number: 38-3207001

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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: DONNA MOCH

04/22/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name GILECZEK, ALAN G
Address 200 N GRAND AVENUE
City-State-Zip: LANSING MI 48933

Title TREA
Name PHILLIPS, ANTHONY G
Address 200 N GRAND AVENUE
City-State-Zip: LANSING MI 48933

Title SEC
Name REYNOLDS, STEVE
Address 200 N GRAND AVENUE
City-State-Zip: LANSING MI 48933

Title BOAR
Name HAAR, ELIZABETH R
Address 200 N GRAND AVENUE
City-State-Zip: LANSING MI 48933

Title BOAR
Name PHILLIPS, ANTHONY G
Address 200 N GRAND AVENUE
City-State-Zip: LANSING MI 48933

Title BOAR
Name CORLESS, LISA M
Address 200 N GRAND AVENUE
City-State-Zip: LANSING MI 48933

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: ANTHONY PHILLIPS

TREASURER

04/22/2019

Electronic Signature of Signing Officer/Director Detail

Date