

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002904

Entity Name: TITAN AUTO INSURANCE OF NEW MEXICO, INC.**Current Principal Place of Business:**5555 ZUNI SE, SUITE 2
ALBUQUERQUE, NM 87108**Current Mailing Address:**5555 ZUNI SE, SUITE 2
ALBUQUERQUE, NM 87108 US**FEI Number:** 74-2825853**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 PRESIDENT, COO, DIRECTOR
Name ARANGO, DAVID G.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title VP, TREASURER, DIRECTOR
Name CROSSER, WENDELL P.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name DEMERS, ALAN
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

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

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

Title DIRECTOR
Name LEX, MICHAEL A.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

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**VICE PRESIDENT AND
SECRETARY****04/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date