

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 04, 2013
Secretary of State
CC9085102182

Entity Name: ALLIED PROPERTY AND CASUALTY INSURANCE COMPANY OF FLORIDA

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: 42-6054959

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER OF FLORIDA
200 E. GAINES STREET
TALLAHASSEE, FL 32399 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 AND CHIEF OPERATING
 OFFICER, DIRECTOR
Name AUSTEN, W. KIM
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 VICE PRESIDENT-FINANCE AND
 TREASURER, DIRECTOR
Name CROSSER, WENDELL P.
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 SENIOR VICE PRESIDENT-FIELD
 OPERATIONS IC
Name ROMMEL, JEFF M.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name BURKE, JAMES R.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name O'HOLLEARN, ROBERT P.
Address ONE NATIONWIDE PLAZA
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name ROMMEL, JEFF M.
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