

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000005088

Entity Name: USABLE MUTUAL INSURANCE COMPANY**Current Principal Place of Business:**601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
LITTLE ROCK, AR 72201**Current Mailing Address:**601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
LITTLE ROCK, AR 72201 US**FEI Number:** 71-0226428**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 VP
Name MEEKS, M.D., CONNIE
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name TATE, SHERMAN
Address 1 ALLIED DRIVE
BUILDING #5
City-State-Zip: LITTLE ROCK AR 72202

Title PRESIDENT
Name BARNETT, CURTIS
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name MARTIN, CARLA
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name TERRY, REX
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name WHITE, P MARK
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title SECRETARY
Name GAUGER, TIMOTHY
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name BERKEMEYER, ALICIA
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Continues on page 2

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: TIMOTHY GAUGER**SECRETARY****03/20/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name BLOODWORTH, DAN
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name FLORA, MATT
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name HENDERSON, KIM
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name JAMES, A. MARCUS
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name MARIS, MAHLON O
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name PACZEWITZ, ERIC
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name SEE, WENDY
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name GREENWAY, MARK V
Address P.O. BOX 777
City-State-Zip: LOWELL AR 72745

Title VP
Name SHERRILL, PHILLIP
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name MAY, J THOMAS

Title VP
Name COOPER, RICHARD
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name HARDY, MELVIN
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name JACOBSON, H. DAVID
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name JOHNSON, MARLA
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name NORMAN, HAL
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name BRITTAIN, SUSAN GLOVER
Address P.O. BOX 518
City-State-Zip: MALVERN AR 72104

Title DIRECTOR
Name BROTHERS, ROBERT VINCENT
Address 916 SYCAMORE TERRACE
City-State-Zip: LOWELL AR 72745-9064

Title DIRECTOR
Name KELLEY, JAMES V
Address P.O. BOX 789
City-State-Zip: TUPELO MS 38802-0789

Title TREASURER
Name DILLARD, GRAY D
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title VP
Name THOMAS, JOANNA
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC

Address P.O. BOX 7009
City-State-Zip: PINT BLUFF AR 71611

Title VP
Name VORDERSTRASSE, SAMUEL
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name OWENS, BEN
Address 517 W. STROUD
City-State-Zip: JONESBORO AR 72401

Title VP
Name ABELL, STEVE
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201

City-State-Zip: LITTLE ROCK AR 72201

Title DIRECTOR
Name NABHOLZ, DAN
Address 2500 BROOKFIELD DRIVE
City-State-Zip: CONWAY AR 72032-4495

Title VP
Name WINTER, SCOTT B.
Address 601 S. GAINES STREET
LEGAL DEPARTMENT, 2-UCC
City-State-Zip: LITTLE ROCK AR 72201