

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000832

Entity Name: RELATION INSURANCE, INC.**Current Principal Place of Business:**5825 MEDLOCK BRIDGE PKWY SUITE 200
JOHNS CREEK, GA 30022**Current Mailing Address:**1277 TREAT BLVD. SUITE 400
WALNUT CREEK, CA 94597 US**FEI Number:** 26-0291031**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**3H AGENT SERVICES, INC.
2114 NW 40TH TERRACE, SUITE D2
GAINESVILLE, FL 32605 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 VARNI, KERI A.
Address 1277 TREAT BLVD. SUITE 400
City-State-Zip: WALNUT CREEK CA 94597

Title DIRECTOR, CEO, EXECUTIVE VP,
TREASURER, ASSISTANT
SECRETARY
Name HALL, TIMOTHY J
Address 9225 INDIAN CREEK PARKWAY
SUITE 700
City-State-Zip: OVERLAND PARK KS 66210

Title PRESIDENT, SECRETARY
Name BROWN, RUSSELL D
Address 10425 S 82ND EAST AVE
SUITE 110
City-State-Zip: TULSA OK 74133

Title VICE PRESIDENT
Name COOPER, JONATHAN W
Address 9225 INDIAN CREEK PARKWAY
SUITE 700
City-State-Zip: OVERLAND PARK KS 66210

Title VICE PRESIDENT
Name MERRILL, GREGORY
Address 9225 INDIAN CREEK PARKWAY
SUITE 700
City-State-Zip: OVERLAND PARK KS 66210

Title CFO
Name HARTMANN, CHARISSA
Address 300 COLONIAL CENTER PARKWAY
SUITE 130
City-State-Zip: LAKE MARY FL 32746

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 J HALL

CEO

04/25/2024

Electronic Signature of Signing Officer/Director Detail

Date