

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000001578

Entity Name: FARMERS SPECIALTY INSURANCE COMPANY**Current Principal Place of Business:**5600 BEECH TREE LANE
CALEDONIA, MI 49316**Current Mailing Address:**P.O. BOX 2450
GRAND RAPIDS, MI 49501**FEI Number:** 59-2326047**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES ST
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 VP
Name NOH, THOMAS S
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR
Name MARRONE, RONALD L
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title SECRETARY
Name HOHL, DOREN E
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title VP
Name SADLER, ROBERT D
Address 5600 BEECH TREE LANE
City-State-Zip: CALEDONIA MI 49316

Title VP, TREASURER, DIRECTOR
Name BARNES, GRETCHEN L
Address 5600 BEECH TREE LANE
City-State-Zip: CALEDONIA MI 49316

Title PRESIDENT
Name DALY, KEITH G
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title VP
Name MCCARTHY, VICTORIA L
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title VP
Name BAUR, MAITE I
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

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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: GRETCHEN L. BARNES**TREASURER****03/23/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name HOWARD, ROBERT P
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR
Name GILDEMEISTER, ALAN R
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title ASST. TREASURER
Name TOMICH, ANTHONY W
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR
Name DASILVA, JULIO A
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR
Name MARTIN, GARY R
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title OFFICER
Name RUSHLO, JENNIFER L
Address 5600 BEECH TREE LANE
City-State-Zip: CALEDONIA MI 49316