

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000004921

Entity Name: HOMESTEAD INSURANCE COMPANY**Current Principal Place of Business:**50 SOUTH 16TH STREET, SUITE 2710
PHILADELPHIA, PA 19102**Current Mailing Address:**50 SOUTH 16TH STREET, SUITE 2710
PHILADELPHIA, PA 19102 US**FEI Number:** NOT APPLICABLE**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 C
Name KNOX, THOMAS J
Address 50 SOUTH 16TH STREET, SUITE 2710
City-State-Zip: PHILADELPHIA PA 19102

Title PST
Name HUNTER KNOX, THOMAS J
Address 50 SOUTH 16TH STREET, SUITE 2710
City-State-Zip: PHILADELPHIA PA 19102

Title D
Name MULLEN, ARTHUR W
Address 116 WOODSIDE AVENUE
City-State-Zip: NARBERTH PA 19072

Title D
Name KNOX, BRANDON T
Address 771 EAGLEFARM ROAD
City-State-Zip: VILLANOVA PA 19085

Title D
Name STAUBER, CHARLES E
Address 295 PINECROFT PLACE
City-State-Zip: BLUE BELL PA 19422

Title D
Name OLIVIA, CHRISTOPHER T
Address 271 MOORE LANE
City-State-Zip: HADDONFIELD NJ 08033

Title D
Name BOCHETTO, GEORGE A
Address 301 S. 17TH STREET
City-State-Zip: PHILADELPHIA PA 19102

Title D
Name AWAD, GEORGE J
Address 619 SPRUCE STREET
City-State-Zip: PHILADELPHIA PA 19106

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: THOMAS J HUNTER KNOX**CFO****04/13/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	D
Name	GREEHN, WILLIAM J
Address	118 WEST ABINGTON AVENUE
City-State-Zip:	PHILADELPHIA PA 19118