

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000004921

Entity Name: HOMESTEAD INSURANCE COMPANY**Current Principal Place of Business:**50 SOUTH 16TH STREET, SUITE 3400
PHILADELPHIA, PA 19102**Current Mailing Address:**50 SOUTH 16TH STREET, SUITE 3400
PHILADELPHIA, PA 19102 US**FEI Number:** 23-1704924**Certificate of Status Desired:** Yes**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 CHAIRMAN, CEO, PRESIDENT
Name KNOX, THOMAS J
Address 50 SOUTH 16TH STREET, SUITE 3400
City-State-Zip: PHILADELPHIA PA 19102

Title CFO, SECRETARY, TREASURER
Name HUNTER KNOX, THOMAS J
Address 50 SOUTH 16TH STREET, SUITE 3400
City-State-Zip: PHILADELPHIA PA 19102

Title DIRECTOR
Name MULLEN, ARTHUR W
Address 1514 ULSTER WAY
City-State-Zip: WEST CHESTER PA 19380

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

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

Title DIRECTOR
Name JOHNSON, STEPHEN JAMES
Address 848 FOUNDERS WAY
City-State-Zip: EAST PETERSBURG PA 17520

Title DIRECTOR
Name OLIVA, ADELE CIRONE
Address 331 LOUELLA AVENUE
City-State-Zip: WAYNE PA 19087

Title DIRECTOR
Name CHAN, EDWARD KUEI CHUNG
Address 205 CAPTAINS WAY
City-State-Zip: PHILADELPHIA PA 19146

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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: THOMAS J. HUNTER KNOX**CHIEF FINANCIAL
OFFICER****02/24/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	RODRIGUEZ, JUAN CARLOS
Address	2 CALLE NAIRN
City-State-Zip:	SAN JUAN OC 00907