

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000003902

Entity Name: GLENCAR INSURANCE COMPANY**Current Principal Place of Business:**200 SOUTH ORANGE AVENUE, SUITE 1900
ORLANDO, FL 32801**Current Mailing Address:**200 SOUTH ORANGE AVENUE, SUITE 1900
ORLANDO, FL 32801 US**FEI Number:** 47-0498866**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
PO BOX 6200
200 E. GAINES STREET
TALLAHASSEE, FL 32339 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	PD
Name	PAUL FEE, PATRICK
Address	200 SOUTH ORANGE AVENUE, SUITE 1900
City-State-Zip:	ORLANDO FL 32801

Title	CFOT
Name	THOMAS PAUL, MICHAEL
Address	200 SOUTH ORANGE AVENUE, SUITE 1900
City-State-Zip:	ORLANDO FL 32801

Title	D
Name	BENEDIKT PICKEL, MICHAEL
Address	200 SOUTH ORANGE AVENUE, SUITE 1900
City-State-Zip:	ORLANDO FL 32801

Title	D
Name	DEAN LUEDTKE, MITCHELL
Address	200 SOUTH ORANGE AVENUE, SUITE 1900
City-State-Zip:	ORLANDO FL 32801

Title	COOS
Name	FRANCES HOOD, CATHERINE
Address	200 SOUTH ORANGE AVENUE, SUITE 1900
City-State-Zip:	ORLANDO FL 32801

Title	CCO
Name	DEL CARMEN VALERIO, YUDELKA
Address	200 SOUTH ORANGE AVENUE, SUITE 1900
City-State-Zip:	ORLANDO FL 32801

Title	D
Name	NMN FREIBOTH, AXEL
Address	200 SOUTH ORANGE AVENUE, SUITE 1900
City-State-Zip:	ORLANDO FL 32801

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: YUDELKA DEL CARMEN VALERIO**CHIEF COMPLIANCE
OFFICER****04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date