2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000004148

Entity Name: POSITIVE PHYSICIANS INSURANCE COMPANY

FILED
Mar 18, 2020
Secretary of State
6548348883CC

Current Principal Place of Business:

100 BERWYN PARK

850 CASSATT ROAD, SUITE 220

BERWYN, PA 19312

Current Mailing Address:

100 BERWYN PARK 850 CASSATT ROAD, SUITE 220 BERWYN, PA 19312 US

FEI Number: 83-2897202 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

850 CASSATT ROAD, SUITE 220

CHIEF FINANCIAL OFFICER

200 E. GAINES ST. (PO BOX 6200 32314-6200)

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 P/CEO/D Title S/D

Name SHARPS, LEWIS Name PENWELL, SCOTT

Address 100 BERWYN PARK Address 100 BERWYN PARK

850 CASSATT ROAD, SUITE 220

City-State-Zip: BERWYN PA 19312 City-State-Zip: BERWYN PA 19312

Title T Title D

Name PAYNE, DANIEL Name JOHNSON, STEPHEN

Address 100 BERWYN PARK Address 100 BERWYN PARK

850 CASSATT ROAD, SUITE 220 850 CASSATT ROAD, SUITE 220

City-State-Zip: BERWYN PA 19312 City-State-Zip: BERWYN PA 19312

Title D Title D

Name ZECH, JAMES Name HITSELBERGER, WILLIAM

Address 100 BERWYN PARK Address 100 BERWYN PARK

850 CASSATT ROAD, SUITE 220 850 CASSATT ROAD, SUITE 220

City-State-Zip: BERWYN PA 19312 City-State-Zip: BERWYN PA 19312

Title D Title D

Name HUFF, CRAIG Name MCLAUGHLIN, DUNCAN

Address 100 BERWYN PARK Address 100 BERWYN PARK

850 CASSATT ROAD, SUITE 220 850 CASSATT ROAD, SUITE 220

City-State-Zip: BERWYN PA 19312 City-State-Zip: BERWYN PA 19312

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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: DONOVAN AUGUSTIN CFO 03/18/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name BROCKMAN, PAUL

Address 100 BERWYN PARK

850 CASSATT ROAD, SUITE 220

City-State-Zip: BERWYN PA 19312

Title DIRECTOR

Name POPOLI, MATTHEW T.

Address 100 BERWYN PARK

850 CASSATT ROAD, SUITE 220

City-State-Zip: BERWYN PA 19312

Title CFO

Name AUGUSTIN, DONOVAN C.

Address 100 BERWYN PARK

850 CASSATT ROAD, SUITE 220

City-State-Zip: BERWYN PA 19312