2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000003879

Entity Name: GUIDEONE AMERICA INSURANCE COMPANY

FILED
Apr 10, 2015
Secretary of State
CC6807755283

Current Principal Place of Business:

1111 ASHWORTH RD

WEST DES MOINES, IA 50265-3538

Current Mailing Address:

1111 ASHWORTH RD

WEST DES MOINES. IA 50265-3538 US

FEI Number: 36-3230348 Certificate of Status Desired: Yes

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
 PCEO, DIRECTOR
 Title
 SVP, DIRECTOR

 Name
 WALLACE, JAMES D
 Name
 REDDIG, SCOTT

 Address
 1111 ASHWORTH RD
 Address
 1111 ASHWORTH RD

Addiess Titt Active Kittle

City-State-Zip: WEST DES MOINES IA 50265 City-State-Zip: WEST DES MOINES IA 50265-3538

Title SVP, SECRETARY Title SVP, TREASURER, DIRECTOR

Name NOGA, ANDREW Name JOOS, MARK

Address 1111 ASHWORTH RD Address 1111 ASHWORTH RD

City-State-Zip: WEST DES MOINES IA 50265 City-State-Zip: WEST DES MOINES IA 50265

Title SVP, DIRECTOR Title DIRECTOR

Name HUGHES, BRIAN J Name BUCKLEY, SARAH
Address 1111 ASHWORTH RD Address 1111 ASHWORTH RD

City-State-Zip: W DES MOINES IA 50265 City-State-Zip: WEST DES MOINES IA 50265-3538

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: ANDREW NOGA SECRETARY 04/10/2015