#### 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F9600003102

**Entity Name: NATIONWIDE AGRIBUSINESS INSURANCE COMPANY** 

FILED
Jun 17, 2014
Secretary of State
CC5242510894

## **Current Principal Place of Business:**

1100 LOCUST STREET
DES MOINES. IA 50391-1100

## **Current Mailing Address:**

1100 LOCUST STREET

DES MOINES. IA 50391-1100 US

FEI Number: 42-1015537 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 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	PRESIDENT, COO, DIRECTOR	Title	VP, SECRETARY
Name	WILLIAMS, TERRANCE	Name	HORNER, ROBERT W. III
Address	ONE NATIONWIDE PLAZA	Address	ONE NATIONWIDE PLAZA
City-State-Zip:	COLUMBUS OH 43215	City-State-Zip:	COLUMBUS OH 43215

SENIOR VICE PRESIDENT Title Title VP, TREASURER Name BIESECKER, PAMELA A. CROSSER, WENDELL P. Name Address ONE NATIONWIDE PLAZA Address ONE NATIONWIDE PLAZA COLUMBUS OH 43215 City-State-Zip: City-State-Zip: COLUMBUS OH 43215

Title EX VICE PRESIDENT, CFO Title DIRECTOR

Name THRESHER, MARK R. Name ALPHIN, LEWIS J.

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

TitleDIRECTORTitleDIRECTORNameAUSTEN, W. KIMNameBELL, A. I.

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

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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: ROBERT W. HORNER, III

**SECRETARY** 

06/17/2014

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name DOUGLAS, GARY A. Name KELLEY, DANIEL T.

Address ONE NATIONWIDE PLAZA

City-State-Zip: COLUMBUS OH 43215

City-State-Zip: COLUMBUS OH 43215

City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR Title DIRECTOR

NameWEILNAU, SPARKY R.NamePORTEUS, BRENT R.AddressONE NATIONWIDE PLAZAAddressONE NATIONWIDE PLAZACity-State-Zip:COLUMBUS OH 43215City-State-Zip:COLUMBUS OH 43215

Title DIRECTOR Title DIRECTOR

NameRASMUSSEN, STEPHEN S.NameZELLERS, JEFFREY W.AddressONE NATIONWIDE PLAZAAddressONE NATIONWIDE PLAZACity-State-Zip:COLUMBUS OH 43215City-State-Zip:COLUMBUS OH 43215