2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000003663

Entity Name: CASTLE KEY INSURANCE COMPANY

Current Principal Place of Business:

780 CARILLON PARKWAY ST. PETERSBURG, FL 33716

Current Mailing Address:

3075 SANDERS ROAD

H1E

NORTHBROOK, IL 60062-7127 US

FEI Number: 36-3586255 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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: DONNA MOCH 04/15/2015

Electronic Signature of Registered Agent

Date

FILED Apr 15, 2015

Secretary of State

CC5264158318

Officer/Director Detail:

TitleCFOTitleSECRETARYNamePILCH, SAMUEL HNameLEES, SUSAN L

Address 3075 SANDERS ROAD Address 2775 SANDRS ROAD

H1E

City-State-Zip: NORTHBROOK IL 60062-6127

Title TREASURER Name RIZZO, MARIO Address 2775 SANDERS ROAD

Address 2775 SANDERS RD City-State-Zip: NORTHBROOK IL 60062

City-State-Zip: NORTHBROOK IL 60062-7127

Title DIRECTOR Title AUTHORIZED REPRESENTATIVE

Name PARSONS, JULIE Name HELSDINGEN, THOMAS

Address 2775 SANDERS ROAD Address 3075 SANDERS ROAD H1E

SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062 City-State-Zip: NORTHBROOK IL 60062-7127

Title SENIOR VICE PRESIDENT Title EXECUTIVE VICE PRESIDENT

Name BARTON, MICHAEL C Name GREFFIN, JUDITH P

Address 2775 SANDERS ROAD Address 2775 SANDERS ROAD

Addless 2173 SAINDERS ROAD

City-State-Zip: NORTHBROOK IL 60062-7127 City-State-Zip: NORTHBROOK IL 60062-7127

Continues on page 2

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 HELSDINGEN

AUTHORIZED REPRESENTATIVE 04/15/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title SENIOR VICE PRESIDENT Title PRESIDENT

NameHASKINS, JAMES ANameSHEELY, MICHAEL SAddress2775 SANDERS ROADAddress2775 SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062-7127 City-State-Zip: NORTHBROOK IL 60062-7127

Title SENIOR VICE PRESIDENT Title SENIOR VICE PRESIDENT

Name DALENTA, THERESA J Name HAIDU, JAMES W
Address 2775 SANDERS ROAD Address 2775 SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062-7127 City-State-Zip: NORTHBROOK IL 60062-7127

Title SENIOR VICE PRESIDENT Title SENIOR VICE PRESIDENT

NameMCRAE, JEFFREY JNameYAGER, FLOYD MAddress2775 SANDERS ROADAddress2775 SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062-7127 City-State-Zip: NORTHBROOK IL 60062-7127

Title SENIOR VICE PRESIDENT Title SENIOR VICE PRESIDENT

NameDEMETRE, MICHAEL WNameHARPER, DAVID SAddress2775 SANDERS ROADAddress2775 SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062-7127 City-State-Zip: NORTHBROOK IL 60062-7127

Title SENIOR VICE PRESIDENT Title DIRECTOR

NameNOLL, PATRICK KNameBARTOS, KIMBERLEY MAddress2775 SANDERS ROADAddress2775 SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062-7127 City-State-Zip: NORTHBROOK IL 60062-7127

Title DIRECTOR Title DIRECTOR

Name GILL, BONNIE S Name PINTOZZI, JOHN C

Address 2775 SANDERS ROAD Address 2775 SANDERS ROAD

City-State-Zip: NORTHBROOK IL 60062-7127