## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002519

Entity Name: ASURION INSURANCE SERVICES, INC.

**Current Principal Place of Business:** 

648 GRASSMERE PARK, SUITE 100 NASHVILLE. TN 37211-3658

**Current Mailing Address:** 

11460 TOMAHAWK CREEK PKWY STE 300 LEAWOOD, KS 66211 US

FEI Number: 62-1463468 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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:

Address

Date Electronic Signature of Registered Agent

Officer/Director Detail:

SR. VICE PRESIDENT OF FINANCE, Title Title CHAIRMAN AND CHIEF EXECUTIVE

**TREASURER OFFICER** 

Name REAGAN, WILLARD J Name TAWEEL, KEVIN M

648 GRASSMERE PARK 160 BOVET ROAD, SUITE 402 Address Address

**STE 100** 

City-State-Zip: SAN MATEO CA 94402-3114 NASHVILLE TN 37211-3658 City-State-Zip:

SR VICE PRESIDENT, GENERAL Title **EXECUTIVE VICE PRESIDENT** Title COUNSEL, AND SECRETARY

Name LAUE, CHARLES A Name PURYEAR IV, GUSTAVUS A

11460 TOMAHAWK CREEK PKWY Address Address 648 GRASSMERE PARK

STE. 300

LEAWOOD KS 66211 City-State-Zip: City-State-Zip: NASHVILLE TN 37211

Title ASST. SECRETARY, VP Title ASST. TREASURER, VP Name TOPOREK, LISA Name ALEXANDER, ELIZABETH

648 GRASSMERE PARK Address 648 GRASSMERE PARK **STE 100** 

**STE 100** 

City-State-Zip: NASHVILLE TN 37211 City-State-Zip: NASHVILLE TN 37211

Title ASST. TREASURER Title ASST. TREASURER Name SLOAN, JASON Name MARTIN, JASON

Address 648 GRASSMERE PARK Address 11460 TOMAHAWK CREEK PKWY

> STE 100 STE. 300

NASHVILLE TN 37211 LEAWOOD KS 66211 City-State-Zip: City-State-Zip:

Continues on page 2

**STE 100** 

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.

03/08/2018 SIGNATURE: ROGER A. DETTER **PRESDIENT** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Mar 08, 2018

**Secretary of State** 

CC7853232298

## Officer/Director Detail Continued:

Title ASST. TREASURER
Name KNOCH, JOHN

Address 648 GRASSMERE PARK

STE 100

City-State-Zip: NASHVILLE TN 37211

Title PRESIDENT AND DIRECTOR

Name DETTER, ROGER Address 160 BOVET RD

STE 402

City-State-Zip: SAN MATEO CA 94402

Title ASST. TREASURER
Name KERSEY, JOHN

Address 648 GRASSMERE PARK

STE 100

City-State-Zip: NASHVILLE TN 37211

Title SENIOR VICE PRESIDENT, CFO, AND

DIRECTOR

Name STOREY, JOHN

Address 648 GRASSMERE PARK

STE 100

City-State-Zip: NASHVILLE TN 37211