

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 16, 2017
Secretary of State
CC5481167321

Entity Name: ALAMANCE INSURANCE COMPANY

Current Principal Place of Business:

238 INTERNATIONAL ROAD
BURLINGTON, NC 27215

Current Mailing Address:

238 INTERNATIONAL ROAD
BURLINGTON, NC 27215

FEI Number: 36-4075938

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 CHAIRMAN, DIRECTOR, CEO
Name LINTON, ROBERT D
Address 100 PEARL ST 5TH FL
City-State-Zip: HARTFORD CT 06103

Title SVP, DIRECTOR
Name ALMAGRO, MANUEL JR
Address 100 PEARL STREET, 5TH FLOOR
City-State-Zip: HARTFORD CT 06103

Title SVP
Name MCMYNE, MICHAEL
Address 100 PEARL ST
City-State-Zip: HARTFORD CT 06103

Title D
Name HAAK, ANDREW C
Address 100 PEARL ST
City-State-Zip: HARTFORD CT 06103

Title EVP, DIRECTOR
Name MONRAD, ELIZABETH A
Address 100 PEARL ST
City-State-Zip: HARTFORD CT 06103

Title VP, ASST. SECRETARY
Name SNOOK, JEFFREY T
Address 238 INTERNATIONAL ROAD
City-State-Zip: BURLINGTON NC 27215

Title DIRECTOR
Name NEWMAN, JAMES E
Address 238 INTERNATIONAL ROAD
City-State-Zip: BURLINGTON NC 27215

Title PRESIDENT
Name LEWIS, CHRISTOPHER M
Address 100 PEARL STREET, 5TH FLOOR
City-State-Zip: HARTFORD CT 06103

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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: BARBARA REZNER

VICE PRESIDENT

03/16/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name REZNER, BARBARA A
Address 100 PEARL STREET, 5TH FLOOR
City-State-Zip: HARTFORD CT 06103

Title TREASURER
Name BLAIR, ROBERT A
Address 100 PEARL ST.
5TH FLOOR
City-State-Zip: HARTFORD CT 06103

Title DIRECTOR
Name SHAPO, NATHANIEL S
Address 238 INTERNATIONAL ROAD
City-State-Zip: BURLINGTON NC 27215

Title VP
Name FLEISCHER, MICHAEL A
Address 3440 PRESTON RIDGE
SUITE 300
City-State-Zip: ALPHARETTA GA 30005