

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F99000006080

**Entity Name:** NATIONAL INSURANCE SERVICES OF WISCONSIN, INC.**Current Principal Place of Business:**450 S ORANGE AVE., 4TH FLOOR  
ORLANDO, FL 32801**Current Mailing Address:**450 S ORANGE AVE., 4TH FLOOR  
ORLANDO, FL 32801 US**FEI Number:** 39-1258067**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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SMITH, SEAN K.  
Address 450 S ORANGE AVE., 4TH FLOOR  
City-State-Zip: ORLANDO FL 32801

Title SECRETARY  
Name KINNETT, STANLEY K. II  
Address 450 S ORANGE AVE., 4TH FLOOR  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name HENDERSON, JIM W.  
Address 450 S ORANGE AVE., 4TH FLOOR  
City-State-Zip: ORLANDO FL 32801

Title PRESIDENT  
Name SMITH, SEAN K.  
Address 450 S ORANGE AVE., 4TH FLOOR  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name LARSEN, RANDY  
Address 450 S ORANGE AVE., 4TH FLOOR  
City-State-Zip: ORLANDO FL 32801

Title TREASURER  
Name LOPEZ, DANIEL  
Address 450 S ORANGE AVE., 4TH FLOOR  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name VREDENBURG, PAUL  
Address 450 S ORANGE AVE., 4TH FLOOR  
City-State-Zip: ORLANDO FL 32801

Title AUTHORIZED SIGNOR  
Name MUSCATELLO, STEVEN D.  
Address 450 S ORANGE AVE., 4TH FLOOR  
City-State-Zip: ORLANDO FL 32801

*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: STEVEN D. MUSCATELLO****AUTHORIZED SIGNOR****04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date