Title	TREASURER		
Name	ROBERTS, CLARK H		
Address	12926 GRAN BAY PARKWAY WEST		
City-State-Zip:	JACKSONVILLE FL 32258		

above, or on an attachment with all other like empowered.

TREASURER

#### SIGNATURE: CLARK H. ROBERTS

Electronic Signature of Signing Officer/Director Detail

# Entity Name: UNITRIN AUTO AND HOME INSURANCE COMPANY

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

12926 GRAN BAY PARKWAY WEST JACKSONVILLE, FL 32258

DOCUMENT# P04560

## **Current Mailing Address:**

12926 GRAN BAY PARKWAY WEST JACKSONVILLE. FL 32258

### FEI Number: 52-1752227

#### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM C T 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	JENIFER VINCENT			04/23/2018					
	Electronic Signature of Registered Agent			Date					
Officer/Director Detail :									
Title	PRESIDENT	Title	SECRETARY						
Name	BOSCHELLI, JOHN M	Name	VRIJMOET, JOHN M						
Address	ONE EAST WACKER DRIVE SUITE 3700	Address	ONE EAST WACKER DRIVE SUITE 1500						
City-State-Zip:	CHICAGO IL 60601	City-State-Zip:	CHICAGO IL 60601						
Title	DIRECTOR	Title	CHAIRMAN						
Name	MINDAK, MAXWELL T	Name	BOSCHELLI, JOHN M						
Address	ONE EAST WACKER DR SUITE 3700	Address	ONE EAST WACKER DR. SUITE 3700						
City-State-Zip:	CHICAGO IL 60601	City-State-Zip:	CHICAGO IL 60601						

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

#### FILED Apr 23, 2018 Secretary of State CC2819983615

Certificate of Status Desired: No

04/23/2018 Date