Electronic Signature of Signing Officer/Director Detail

Entity Name: UNITED CASUALTY INSURANCE COMPANY OF AMERICA

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

200 EAST RANDOLPH STREET **SUITE 3300** CHICAGO, IL 60601

DOCUMENT# P07294

Current Mailing Address:

12115 LACKLAND ROAD ST. LOUIS, MO 63146-4003 US

FEI Number: 23-1614367

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 US

Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Director Detail :				
Title	DIRECTOR	Title	CHAIRMAN OF THE BOARD & PRESIDENT	
Name	FLINT, CHRISTOPHER W.	Name	FLINT, CHRISTOPHER W.	
Address	200 EAST RANDOLPH STREET SUITE 3300	Address	200 EAST RANDOLPH STREET SUITE 3300	
City-State-Zip:	CHICAGO IL 60601	City-State-Zip:		
Title	DIRECTOR	Title	DIRECTOR	
Name	BOSCHELLI, JOHN M.			
Address	200 EAST RANDOLPH STREET	Name	MINDAK, MAXWELL T.	
0.1.01.1.7.	SUITE 3300	Address	200 EAST RANDOLPH STREET SUITE 3300	
City-State-Zip:	CHICAGO IL 60601	City-State-Zip:	CHICAGO IL 60601	
Title	SENIOR VICE PRESIDENT & SECRETARY	Title	DIRECTOR	
Name	KOPPS-WAGNER, JENNIFER M.	Name	ALEXANDER, JAMES A.	
Address	200 EAST RANDOLPH STREET SUITE 3300	Address	200 EAST RANDOLPH STREET SUITE 3300	
City-State-Zip:	CHICAGO IL 60601	City-State-Zip:	CHICAGO IL 60601	
Title	DIRECTOR	Title	TREASURER	
Name	BOHRER, KENNETH	Name	DANCER, CHRISTIAN	
Address	200 EAST RANDOLPH STREET SUITE 3300	Address	200 EAST RANDOLPH STREET SUITE 3300	
City-State-Zip:	CHICAGO IL 60601	City-State-Zip:	CHICAGO IL 60601	

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: JENNIFER M. KOPPS-WAGNER

SENIOR VICE PRESIDENT 04/16/2024 & SECRETARY

FILED Apr 16, 2024 Secretary of State 1149524097CC

Date

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MOSES, CHRISTOPHER L.
Address	200 EAST RANDOLPH STREET SUITE 3300
City-State-Zip:	CHICAGO IL 60601