

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08523

FILED
Apr 27, 2013
Secretary of State
CC5461779529

Entity Name: OLD REPUBLIC FINANCIAL ACCEPTANCE CORPORATION

Current Principal Place of Business:

307 N. MICHIGAN AVENUE
CHICAGO, IL 60601

Current Mailing Address:

1100 WEST 29TH STREET
SOUTH SIOUX CITY, NE 68776

FEI Number: 36-3345721

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AIDIF, DANIEL R
501 EAST SOUTH STREET
SUITE A
ORLANDO, FL 32801 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 DP
Name MILAZZO, LEONARD
Address 307 N. MICHIGAN AVENUE
City-State-Zip: CHICAGO IL 60601

Title DVPT
Name BRAUER, CARL H
Address 307 N. MICHIGAN AVENUE
City-State-Zip: CHICAGO IL 60601

Title S
Name JASSO, FRANCISCO
Address 307 N. MICHIGAN AVENUE
City-State-Zip: CHICAGO IL 60601

Title VP
Name GAYLEN, TENHULZEN L
Address 1100 WEST 29TH STREET
City-State-Zip: SOUTH SIOUX CITY NE 68776

Title AS
Name COMSTOCK, JOALLYN
Address 307 N. MICHIGAN AVENUE
City-State-Zip: CHICAGO IL 60601

Title VP
Name JENSEN, JAMES D
Address 1100 WEST 29TH STREET
City-State-Zip: SOUTH SIOUX CITY NE 68776

Title VP
Name ANDERSON, MARY E
Address 307 N. MICHIGAN AVENUE
City-State-Zip: CHICAGO IL 60601

Title VP
Name OLSON, STEVEN J
Address 1100 WEST 29TH STREET
City-State-Zip: SOUTH SIOUX CITY NE 68776

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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: GAYLEN L. TENHULZEN

VICE PRESIDENT

04/27/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MUELLER, KARL W
Address 307 N. MICHIGAN AVENUE
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR
Name NARD, CHRISTOPHER S
Address 307 N. MICHIGAN AVENUE
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR
Name RAGER, RICHARD S
Address 1100 WEST 29TH STREET
City-State-Zip: SOUTH SIOUX CITY NE 68776