

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20309

FILED
Mar 15, 2013
Secretary of State
CC6065545921

Entity Name: NATIONAL AMERICAN INSURANCE COMPANY OF CALIFORNIA
INCORPORATED

Current Principal Place of Business:

444 W. OCEAN BLVD
18TH FLOOR
LONG BEACH, CA 90802

Current Mailing Address:

P.O. BOX 32039
LONG BEACH, CA 90832 US

FEI Number: 95-2488300

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
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 P
Name POTTLE, THOMAS A
Address 444 W. OCEAN BLVD., 18TH FLOOR
City-State-Zip: LONG BEACH CA 90802

Title SV
Name HEIN, DONALD G
Address 444 W. OCEAN BLVD., 18TH FLOOR
City-State-Zip: LONG BEACH CA 90802

Title V
Name GRANT, KEVIN M
Address 444 W. OCEAN BLVD., 18TH FLOOR
City-State-Zip: LONG BEACH CA 90802

Title D
Name SIMPSON, TIMOTHY J
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

Title D
Name PERUSSE, GARY D
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

Title D
Name KHATTRI, SANJIV
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

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: DONALD G. HEIN

VICE PRESIDENT

03/15/2013

Electronic Signature of Signing Officer/Director Detail

Date