2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23471

Entity Name: CENTURION CASUALTY COMPANY

Current Principal Place of Business:

2717 N. 118TH STREET

NORTH PARK OFFICE PARK SUITE 300

OMAHA, NE 68164

Current Mailing Address:

2717 N. 118TH STREET NORTH PARK OFFICE PARK SUITE 300

OMAHA NE 68164

OMAHA, NE 68164 US

FEI Number: 42-1194107 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CT CORPORATION SYSTEM 1200 S PINE SILAND RD 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:

City-State-Zip:

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

Name WIFFLER, THOMAS PATRICK Name MCQUAGGE, TROY ALAN

Address 2717 N. 118TH STREET Address 2717 N. 118TH STREET

> NORTH PARK OFFICE PARK SUITE NORTH PARK OFFICE PARK SUITE

OMAHA NE 68164 City-State-Zip: OMAHA NE 68164 City-State-Zip:

Title **PRESIDENT** Title **TREASURER**

Name MCQUAGGE, TROY ALAN Name GILL, PETER MARSHALL

Address 2717 N. 118TH STREET Address 2717 N. 118TH STREET

NORTH PARK OFFICE PARK SUITE NORTH PARK OFFICE PARK SUITE 300 300

City-State-Zip:

OMAHA NE 68164

Title ASSISTANT SECRETARY Title ASSISTANT SECRETARY

BRODY, MICHAEL CHARLES Name LANG, HEATHER ANASTASIA Name

Address 2717 N. 118TH STREET Address 2717 N. 118TH STREET NORTH PARK OFFICE PARK SUITE NORTH PARK OFFICE PARK SUITE

City-State-Zip: **OMAHA NE 68164** City-State-Zip: OMAHA NE 68164

٧P CEO Title Title

COTTINGTON, NYLE BRENT MCQUAGGE, TROY ALAN Name Name

Address 2717 N. 118TH STREET Address 2717 N. 118TH STREET

NORTH PARK OFFICE PARK SUITE NORTH PARK OFFICE PARK SUITE 300 300

City-State-Zip: OMAHA NE 68164 City-State-Zip: OMAHA NE 68164

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.

04/20/2024 SIGNATURE: HEATHER ANASTASIA LANG ASSISTANT SECRETARY

FILED Apr 20, 2024 Secretary of State 6555287269CC

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name MILAM, MATTHEW WALKER

Address

2717 N. 118TH STREET

NORTH PARK OFFICE PARK SUITE 300

City-State-Zip: OMAHA NE 68164

Title CFO

Name SCHOETTLE, JEREMY MICHAEL

Address 2717 N. 118TH STREET

NORTH PARK OFFICE PARK SUITE 300

City-State-Zip: OMAHA NE 68164

Title DIRECTOR

Name WILLIAMS, GREGORY ASHER

Address 2717 N. 118TH STREET

NORTH PARK OFFICE PARK SUITE 300

City-State-Zip: OMAHA NE 68164

Title SECRETARY

Name ROGOFF, DANIEL LOUIS

Address 2717 N. 118TH STREET

NORTH PARK OFFICE PARK SUITE

300

City-State-Zip: OMAHA NE 68164

Title DIRECTOR

Name MORIZZO, CAROLYNN JOANN

Address 2717 N. 118TH STREET

NORTH PARK OFFICE PARK SUITE

300

City-State-Zip: OMAHA NE 68164