

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23692

**FILED**  
**Mar 30, 2015**  
**Secretary of State**  
**CC0919048495**

**Entity Name:** UNDERWRITERS SURETY INC

**Current Principal Place of Business:**

250 EAST 96TH STREET  
STE #202  
INDIANAPOLIS, IN 46240

**Current Mailing Address:**

P.O. BOX 68932  
INDIANAPOLIS, IN 46268

**FEI Number:** 35-1687484

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title	D	Title	DPCE
Name	WHITLOCK, JOHN TDIR	Name	CARMICHAEL, WILLIAM BDCEO
Address	250 EAST 96TH STREET, SUITE #202	Address	250 EAST 96TH STREET, SUITE #202
City-State-Zip:	INDIANAPOLIS IN 46240	City-State-Zip:	INDIANAPOLIS IN 46240
Title	CFOS	Title	EXECUTIVE VICE PRESIDENT
Name	LONGSTRETH, PAUL JCFO	Name	WHITLOCK, MICHAEL J
Address	250 EAST 96TH STREET, SUITE #202	Address	250 EAST 96TH STREET #202
City-State-Zip:	INDIANAPOLIS IN 46240	City-State-Zip:	INDIANAPOLIS IN 46240

*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:** PAUL J LONGSTRETH

**CFO/DIRECTOR**

**03/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date