

2014 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P26694

**FILED
Jun 30, 2014
Secretary of State
CC7290954172**

Entity Name: DEALERS ASSURANCE COMPANY

Current Principal Place of Business:

240 N. FIFTH STREET
SUITE 350
COLUMBUS, OH 43215

Current Mailing Address:

240 N. FIFTH STREET
SUITE 350
COLUMBUS, OH 43215 US

FEI Number: 34-6513705

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
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 PRESIDENT
Name GRUBER, KRISTEN A
Address 240 N. FIFTH STREET
 SUITE 350
City-State-Zip: COLUMBUS OH 43215

Title SECRETARY
Name LEVINE, DAVID S
Address 240 N. FIFTH STREET
 SUITE 350
City-State-Zip: COLUMBUS OH 43215

Title TREASURER
Name SPOHN, SHARON M
Address 240 N. FIFTH STREET
 SUITE 350
City-State-Zip: COLUMBUS OH 43215

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: DAVID LEVINE

SECRETARY

06/30/2014

Electronic Signature of Signing Officer/Director Detail

Date