

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90210 040 ***550.00

DOCUMENT # F95000005863

1. Entity Name
KEYCORP INSURANCE AGENCY INC.

Principal Place of Business
 127 PUBLIC SQ., 4TH FLOOR
 MAILCODE OH-01-27-0809
 CLEVELAND OH 44114
 US

Mailing Address
 127 PUBLIC SQ., 8TH FLOOR
 MAILCODE OH-01-27-0826
 CLEVELAND OH 44114-1306
 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **14-1745243**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CITICORPORATION SYSTEM
1201 HAYS STREET
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **AS** ☐ Delete
 NAME **BULLOCH, STEVEN N**
 STREET ADDRESS **127 PUBLIC SQUARE**
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **KOPINSKI, JACK L.**
 STREET ADDRESS **127 PUBLIC SQUARE**
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition
 NAME ***See Attached Lists for**
 STREET ADDRESS **Current Officers and**
 CITY-ST-ZIP **Directors**

TITLE **D** ☒ Delete
 NAME **KOPULSKY, JACK L.**
 STREET ADDRESS **127 PUBLIC SQUARE**
 CITY-ST-ZIP **CLEVELAND OH**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **HEISLER, ROBERT B JR**
 STREET ADDRESS **127 PUBLIC SQUARE**
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **BENNETT, JAMES E**
 STREET ADDRESS **127 PUBLIC SQUARE**
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **WOODROW HUGHES**
 CITY-ST-ZIP **800 Superior Avenue**
Cleveland, OH 44114

TITLE **D** ☐ Delete
 NAME **HEISLER, ROBERT B. JR**
 STREET ADDRESS **127 PUBLIC SQUARE**
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard G. Zeiger, Sec. 09-10-02

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

978871

#F9500005 863

KEYCORP INSURANCE AGENCY USA, INC.
A Washington Corporation

DIRECTORS

Full Legal Name: **Jack L. Kopnisky**
Business Addr: 127 Public Square
Cleveland, OH 44114

Full Legal Name: **Robert Bauman Heisler, Jr.**
Business Addr: 127 Public Square
Cleveland, Ohio 44114

Full Legal Name: **Woodrow Hughes**
Business Addr: 800 Superior Avenue
Cleveland, Ohio 44114

Attachment

978811

#F95000005863

KEYCORP INSURANCE AGENCY USA, INC.
A Washington Corporation

OFFICERS

Full Legal Name: **Woodrow Hughes - President**

Business Addr: 800 Superior Avenue
Cleveland, OH 44114

Full Legal Name: **Richard G. Zeiger - Secretary**

Business Addr: 127 Public Square
Cleveland, Ohio 44114

Full Legal Name: **Steven N. Bulloch - Assistant Secretary**

Business Addr: 127 Public Square
Cleveland, Ohio 44114

Full Legal Name: **Thaddeus J. Lyda- Treasurer**

Business Addr: 127 Public Square
Cleveland, Ohio 44114

Full Legal Name: **Armando Leo - Vice President**

Business Addr: 745 Atlantic Avenue
Boston, MA 02111

Attachment

978871

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Full Legal Name: **Brian J. Jenner - Vice President**
Business Addr: 4 North Main Street
Chagrin Falls, OH 44022

Full Legal Name: **Randal J. Wilhelmsen - Vice President**
Business Addr: 1109 Pacific Avenue
Tacoma, WA

Full Legal Name: **Thomas M. Munoz - Vice President**
Business Addr: 800 Superior Avenue
Cleveland, Ohio 44114

Full Legal Name: **Michael R. Sharpe - Vice President**
Business Addr: 800 Superior Avenue
Cleveland, Ohio 44114

Full Legal Name: **Gary Koch - Vice President**
Business Addr: 101 W. Benson
Anchorage, Alaska 99503

Full Legal Name: **Kristin Hirsch - Vice President**
Business Addr: 800 Superior Avenue
Cleveland, OH 44114

Full Legal Name: **Lindsey Carter-Hunter - Vice President**
Business Addr: 1101 Pacific Avenue, 3rd Floor
Tacoma, WA 98402

Full Legal Name: **James E. Shook**
Business Addr: 800 Superior Avenue
Cleveland, OH 44114

Full Legal Name: **Joni R. Vann - Officer**
Business Addr: 702 W. Idaho
Boise, ID 83702

Full Legal Name: **Carol V. Moore - Licensing Officer**
Business Addr: 800 Superior Avenue
Cleveland, OH 44114