#### 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082274

**Entity Name: NGM INSURANCE COMPANY** 

**Current Principal Place of Business:** 

4601 TOUCHTON RD EAST SUITE 3400

JACKSONVILLE, FL 32246

## **Current Mailing Address:**

4601 TOUCHTON RD EAST SUITE 3400 JACKSONVILLE, FL 32246 US

FEI Number: 02-0170490 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

FOX, BRUCE R 4601 TOUCHTON RD EAST SUITE 3400 JACKSONVILLE, FL 32246 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:

Electronic Signature of Registered Agent

Date

FILED Jan 09, 2017

**Secretary of State** 

CC2188233441

Officer/Director Detail:

Title P Title T

Name VAN BERKEL, THOMAS M Name KUHL, EDWARD J

Address 4601 TOUCHTON RD E, STE 3400 Address 4601 TOUCHTON RD E, STE 3400

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

Title S Title D

Name FOX, BRUCE R Name GUNTER, WILLIAM DJR.

Address 4601 TOUCHTON RD E, STE 3400 Address 4601 TOUCHTON RD E, STE 3400

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

Title D Title DIRECTOR

Name DELANEY, JOHN A Name BAXTER, TERRY L

Address 4601 TOUCHTON RD E, STE 3400 Address 4601 TOUCHTON RD EAST SUITE 3400

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR Title DIRECTOR

Name CLEVELAND, COTTON M

Address 4601 TOUCHTON RD EAST Address 4601 TOUCHTON RD EAST

SUITE 3400 Address 4601 TOUCHTON RD EAST

JACKSONVILLE FL 32246 Site State 7 in JACKSONVI

JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

# 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.

SIGNATURE: BRUCE R FOX SECRETARY 01/09/2017

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name ELFNER, ALBERT H Name FREEMAN, DAVID

Address 4601 TOUCHTON RD EAST Address 4601 TOUCHTON RD EAST

SUITE 3400 SUITE 3400

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR Title DIRECTOR

Name KESNER, IDALENE F Name MORLEY, JAMES E

Address 4601 TOUCHTON RD EAST Address 4601 TOUCHTON RD EAST

SUITE 3400 SUITE 3400

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32246