#### 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000073794

Entity Name: BRIDGEFIELD CASUALTY INSURANCE COMPANY

FILED Apr 17, 2025 Secretary of State 2359856751CC

## **Current Principal Place of Business:**

117 N. MASSACHUSETTS AVENUE

LAKELAND, FL 33801

# **Current Mailing Address:**

117 N. MASSACHUSETTS AVENUE LAKELAND, FL 33801 US

FEI Number: 59-3269531 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER

200 E. GAINES ST 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 VICE PRESIDENT / CHIEF FINANCIAL

**OFFICER** 

Name SMYTH, PATRICK J.

Address 117 N. MASSACHUSETTS AVENUE

City-State-Zip: LAKELAND FL 33801

Title ASSISTANT TREASURER

Name OELRICH, MATTHEW C.

Address 117 N. MASSACHUSETTS AVENUE

City-State-Zip: LAKELAND FL 33801

Title DIRECTOR

Name HERTZMAN, BRIAN S.

Address 301 EAST FOURTH STREET

City-State-Zip: CINCINNATI OH 45202

Title VICE PRESIDENT

Name RITTER, BRAD M.

Address 117 N. MASSACHUSETTS AVENUE

City-State-Zip: LAKELAND FL 33801

Title ASSISTANT TREASURER

Name GILL, JUDITH E.

Address 117 N. MASSACHUSETTS AVENUE

City-State-Zip: LAKELAND FL 33801

Title ASSISTANT SECRETARY

Name BERAHA, STEPHEN C.

Address 301 EAST FOURTH STREET

City-State-Zip: CINCINNATI OH 45202

Title DIRECTOR

Name GILLIS, MICHELLE (SHELLY) A.

Address 301 EAST FOURTH STREET

City-State-Zip: CINCINNATI OH 45202

Title VICE PRESIDENT

Name ARNOLD, MICHAEL S.

Address 117 N. MASSACHUSETTS AVENUE

City-State-Zip: LAKELAND FL 33801

#### 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: MATTHEW D. FELVUS

SECRETARY, BY JON-MICHAEL SANCHEZ ATTORNEY-IN-FACT 04/17/2025

## Officer/Director Detail Continued:

117 N. MASSACHUSETTS AVENUE

Address

VICE PRESIDENT Title Title **DIRECTOR** 

MARKS, PAUL MERCURIO, ANTHONY J. Name Name Address 117 N. MASSACHUSETTS AVENUE Address 3250 INTERSTATE DRIVE

RICHFIELD OH 44286-9000 City-State-Zip: City-State-Zip: LAKELAND FL 33801

Title **TREASURER** Title VICE PRESIDENT

GARDNER, ANNETTE D. Name Name CHILES, HENRY E. JR. Address 301 EAST FOURTH STREET

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: LAKELAND FL 33801

Title CHIEF COMPLIANCE OFFICER Title **DIRECTOR / VICE CHAIRMAN** Name GROSSMAN, MAGDALENA F. SULLIVAN, MICHAEL E. JR. Name

117 N. MASSACHUSETTS AVENUE Address Address 301 EAST FOURTH STREET

City-State-Zip: LAKELAND FL 33801 City-State-Zip: CINCINNATI OH 45202

Title VICE PRESIDENT Title **DIRECTOR / CHAIRMAN** Name GRIMM, ROBERT DARIN

THOMPSON, DAVID L. JR. Name Address

117 N. MASSACHUSETTS AVENUE Address 301 EAST FOURTH STREET

City-State-Zip: LAKELAND FL 33801 City-State-Zip: CINCINNATI OH 45202

Title **SECRETARY** ASSISTANT SECRETARY Title

Name FELVUS, MATTHEW D. Name JALOVEC, MICHAEL T.

Address 301 EAST FOURTH STREET Address 117 N. MASSACHUSETTS AVENUE

City-State-Zip: CINCINNATI OH 45202 City-State-Zip: LAKELAND FL 33801

Title ASSISTANT TREASURER Title **PRESIDENT** ZBACNIK, ROBERT J.

Name Name WOOD, JAMES F.

301 EAST FOURTH STREET Address Address 117 N. MASSACHUSETTS AVENUE City-State-Zip: CINCINNATI OH 45202 City-State-Zip: LAKELAND FL 33801