

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 803620

**Entity Name:** HARTFORD CASUALTY INSURANCE COMPANY

**Current Principal Place of Business:**

ONE HARTFORD PLAZA  
HARTFORD, CT 06155

**Current Mailing Address:**

ONE HARTFORD PLAZA  
HO-1-11  
HARTFORD, CT 06155 US

**FEI Number:** 06-0294398

**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 SECRETARY  
Name BARNETT, KEVIN F  
Address ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

Title ASST. VICE PRESIDENT  
Name SEITZ, HOLLY  
Address ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

Title ASST. SECRETARY  
Name OLEKSAK, KEVIN  
Address ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

Title DIRECTOR  
Name MCKEE, RANDLE L  
Address 4245 MERIDIAN PARKWAY  
City-State-Zip: AURORA IL 60504

Title DIRECTOR  
Name PHIFER, ANTHONY  
Address 501 PENNSYLVANIA PARKWAY  
SUITE 300  
City-State-Zip: INDIANAPOLIS IN 46280

Title ASST. SECRETARY  
Name KEMP, ELIZABETH  
Address ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

Title DIRECTOR  
Name STEPNOWSKI, AMY M  
Address ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

Title DIRECTOR  
Name CHANDY, EAPEN A  
Address ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

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*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:** KEVIN F. BARNETT

**SECRETARY**

**03/16/2023**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           JORENS, KATHLEEN E  
Address        ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

Title           ASSIST. SECRETARY  
Name           HARNISH, CHARLENE  
Address        ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

Title           PRESIDENT, DIRECTOR  
Name           FISHER, MICHAEL ROSS  
Address        ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155

Title           ASST. SECRETARY  
Name           DOYLE, CHRISTOPHER  
Address        ONE HARTFORD PLAZA  
City-State-Zip: HARTFORD CT 06155