

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 806047

**Entity Name:** UNITED INSURANCE COMPANY OF AMERICA

**Current Principal Place of Business:**

200 EAST RANDOLPH STREET  
SUITE 3300  
CHICAGO, IL 60601

**Current Mailing Address:**

12115 LACKLAND ROAD  
ST. LOUIS, MO 63146-4003 US

**FEI Number:** 36-1896670

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 VP  
Name MCGILL, TROY J.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title VP  
Name WHEELER, MICHAEL C.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title VP  
Name HOLLEY, DAVID R.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title VP  
Name GAUTREAU, REBA B.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title VP  
Name BROOKS, CHARLES T.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR  
Name MINDAK, MAXWELL T.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title PRESIDENT  
Name STONEHOCKER, TIMMY L.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title VP  
Name OLDS, GREG K.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

**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:** KOPPS-WAGNER, JENNIFER M

**AUTHORIZED SIGNER**

**04/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name GALIANO, JOSE M.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR  
Name BOSCHELLI, JOHN M.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title TREASURER  
Name CHRISTIAN, DANCER  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title SECRETARY  
Name KOPPS-WAGNER, JENNIFER M.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601

Title VP, DIRECTOR  
Name FRONING, STEVEN M.  
Address 200 EAST RANDOLPH STREET  
SUITE 3300  
City-State-Zip: CHICAGO IL 60601