

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 808387

Entity Name: WESTFIELD INSURANCE COMPANY

Current Principal Place of Business:

ONE PARK CIRCLE
LEGAL DEPARTMENT
WESTFIELD CENTER, OH 44251-5001

Current Mailing Address:

ONE PARK CIRCLE
LEGAL DEPARTMENT
WESTFIELD CENTER, OH 44251-5001

FEI Number: 34-6516838

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 PRES/CEO
Name LARGENT, EDWARD JIII
Address 285 CATAWBA PATH
City-State-Zip: DOYLESTOWN OH 44230

Title TRE
Name KOHMANN, JOSEPH C
Address 176 BRENT ALLEN DRIVE
City-State-Zip: WADSWORTH OH 44281

Title SEC
Name CARRINO, FRANK
Address 3564 OLD HICKORY LANE
City-State-Zip: MEDINA OH 44251

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: FRANK CARRINO

SECRETARY

03/29/2017

Electronic Signature of Signing Officer/Director Detail

Date