## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 815511** 

**Entity Name: GEICO INDEMNITY COMPANY** 

**Current Principal Place of Business:** 

ONE GEICO BLVD

FREDERICKSBURG, VA 22412

**Current Mailing Address:** 

5260 WESTERN AVENUE CHEVY CHASE, MD 20815

FEI Number: 52-0794134 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHEVY CHASE MD

CHIEF FINANCIAL OFFICER 200 EAST GAINES STREET TALLAHASSEE, FL 32399 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:

Title

Electronic Signature of Registered Agent

Date

**FILED** Jan 08, 2014

**Secretary of State** 

CC3248911726

Officer/Director Detail:

С

Title CEOP Title

NICELY, OLZA M Name SCHARA,, CHARLES G Name 5260 WESTERN AVENUE Address 5260 WESTERN AVENUE Address City-State-Zip: CHEVY CHASE MD

Name ROBINSON, WILLIAM C Name MCDONALD, WILLIAM J Address 5260 WESTERN AVENUE Address 5250 WESTERN AVE CHEVY CHASE MD City-State-Zip: City-State-Zip: CHEVY CHASE MD 20815

Title

S

VΡ Title Title

Name STEWART, JAN C ROGERS. GEORGE W Name

Address 5260 WESTERN AVENUE Address 5260 WESTERN AVENUE

City-State-Zip: CHEVY CHASE MD City-State-Zip: CHEVY CHASE MD 20815

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: WILLIAM C. E. ROBINSON

**SECRETARY** 

01/08/2014