

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816587

Entity Name: THE AMERICAN ROAD INSURANCE COMPANY

Current Principal Place of Business:

TAX DEPARTMENT, FORD WHQ, ROOM 612
1 AMERICAN ROAD
DEARBORN, MI 48126

FILED
Mar 14, 2018
Secretary of State
CC3553296441

Current Mailing Address:

TAX DEPARTMENT, FORD WHQ, ROOM 612
1 AMERICAN ROAD
DEARBORN, MI 48126 US

FEI Number: 38-1630841

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 PRESIDENT
Name PHILLIPS, SUZANNE
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126

Title SECRETARY
Name GOOD, CARL S
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126

Title ASST. SECRETARY
Name GREENWELL, JENNIFER
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126

Title TREASURER
Name GALEANO, ALEXANDRA
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126

Title DIRECTOR
Name RUSHING, ANDREW
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126

Title DIRECTOR
Name KUCHENBERG, GREGORY
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126

Title DIRECTOR
Name MOYNES, JAMES
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126

Title DIRECTOR
Name MISTRETTA, MARRETTA
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126

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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: JENNIFER GREENWELL

ASSISTANT SECRETARY 03/14/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PHILLIPS, SUZANNE
Address ONE AMERICAN ROAD
City-State-Zip: DEARBORN MI 48126