

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 822259

Entity Name: YOSEMITE INSURANCE COMPANY**Current Principal Place of Business:**601 N.W. SECOND ST
EVANSVILLE, IN 47708**Current Mailing Address:**3001 MEACHAM BLVD.
STE. 100
FORT WORTH, TX 76137 US**FEI Number:** 94-1590201**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T 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:** NO CHANGE

01/11/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR	Title	SECRETARY
Name	ROACH, GEORGE D	Name	ERKILLA, JACK R
Address	601 N.W. SECOND ST	Address	601 N.W. SECOND ST
City-State-Zip:	EVANSVILLE IN 47708	City-State-Zip:	EVANSVILLE IN 47708
Title	DIRECTOR, SENIOR VICE PRESIDENT	Title	DIRECTOR, CFO
Name	GREGG, LEHMAN H	Name	NEAL, RONALD D
Address	3001 MEACHAM BLVD. STE. 100	Address	3001 MEACHAM BLVD. STE. 100
City-State-Zip:	FORT WORTH TX 76137	City-State-Zip:	FORT WORTH TX 76137
Title	DIRECTOR, SENIOR VICE PRESIDENT	Title	DIRECTOR, PRESIDENT
Name	KOPPEN, MICHAEL F	Name	CARSON, DAVA
Address	3001 MEACHAM BLVD. STE. 100	Address	3001 MEACHAM BLVD. STE. 100
City-State-Zip:	FORT WORTH TX 76137	City-State-Zip:	FORT WORTH TX 76137

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: GREGG H. LEHMAN

SVP

01/11/2018

Electronic Signature of Signing Officer/Director Detail

Date