

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827926

Entity Name: RLI INSURANCE COMPANY

Current Principal Place of Business:

9025 N LINDBERGH DR
PEORIA, IL 61615

Current Mailing Address:

9025 N LINDBERGH DR
PEORIA, IL 61615 US

FEI Number: 37-6030010

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: TERESA J. ALLEN

04/26/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name FICK, JEFFREY D.
Address 9025 N. LINDBERGH DR.
City-State-Zip: PEORIA IL 61615

Title PRESIDENT & COO
Name KLIETHERMES, CRIAG W.
Address 9025 N. LINDBERGH DR.
City-State-Zip: PEORIA IL 61615

Title ASST. TREASURER
Name DAVIS, SETH
Address 9025 N. LINDERGH DR.
City-State-Zip: PEORIA IL 61615

Title TREASURER
Name DIEFENTHALER, AARON P.
Address 9025 N LINDBERGH DR
City-State-Zip: PEORIA IL 61615

Title DIRECTOR
Name KLOBNAK, JENNIFER LEIGH
Address 9025 N LINDBERGH DR
City-State-Zip: PEORIA IL 61615

Title CFO, DIRECTOR
Name BRYANT, TODD W.
Address 9025 N LINDBERGH DR
City-State-Zip: PEORIA IL 61615

Title VP
Name DOSS, JUSTIN
Address 9025 N LINDBERGH DR
City-State-Zip: PEORIA IL 61615

Title VP
Name DAVIS, BARTON
Address 9025 N LINDBERGH DR
City-State-Zip: PEORIA IL 61615

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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: CHRISTINA G. DEAN

ASST. SECRETARY

04/26/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name SCHICK, BRIAN
Address 9025 N LINDBERGH DR
City-State-Zip: PEORIA IL 61615

Title ASST. SECRETARY
Name DEAN, CHRISTINA G.
Address 9025 N LINDBERGH DR
City-State-Zip: PEORIA IL 61615

Title ASST. VP
Name ALEXANDER , CHRISTOPHER
Address 9025 N LINDBERGH DR
City-State-Zip: PEORIA IL 61615