## **2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 844748** 

**Entity Name: INFINITY AUTO INSURANCE COMPANY** 

**Current Principal Place of Business:** 

2201 4TH AVENUE NORTH BIRMINGHAM. AL 35203

**Current Mailing Address:** 

PO BOX 830189

BIRMINGHAM. AL 35283-0189 US

FEI Number: 34-0927698 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST P O BOX 6200 (32314-6200) 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: CT CORP 03/28/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title D Title CEOP

NameGOBER, JAMER RNameGODWIN, GLEN NAddressPO BOX 830189AddressPO BOX 830189

City-State-Zip: BIRMINGHAM AL 35283-0189 City-State-Zip: BIRMINGHAM AL 35283-0189

Title CFO Title AT

Name BATEMAN, ROBERT Name CLARK, MARY LINN
Address PO BOX 830189 Address PO BOX 830189

City-State-Zip: BIRMINGHAM AL 35283-0189 City-State-Zip: BIRMINGHAM AL 35283-0189

Title VSD

Name SIMON, SAMUEL J Address PO BOX 830189

City-State-Zip: BIRMINGHAM AL 35283-0189

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: ROBERT BATEMAN

SR VP & CFO

03/28/2018

FILED Mar 28, 2018

**Secretary of State** 

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