2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2014
Secretary of State
CC8057829180

DOCUMENT# 850386

Entity Name: LYNDON PROPERTY INSURANCE COMPANY

Current Principal Place of Business:

14755 NORTH OUTER FORTY DR
SUITE 400
ST. LOUIS, MO 63017-6050

Current Mailing Address:

14755 NORTH OUTER FORTY DR.
STE 400
CHESTERFIELD, MO 63017-6050 US

FEI Number: 43-1139865

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E GAINES ST
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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	VPTD
Name	CARIOLANO, GREGG O
Address	14755 N. OUTER FORTY DR.
City-State-Zip:	ST. LOUIS MO 63017-6050

Title	PD
Name	KARCHUNAS, M. SCOTT
Address	14755 N. OUTER FORTY DR.
City-State-Zip:	ST. LOUIS MO 63017-6050

Title	ASD
Name	DOWNAR, MARK S
Address	14755 N OUTER FORTY DR
City-State-Zip:	ST LOUIS MO 63017-6050

Title	DIRECTOR
Name	KARCHUNAS, SCOTT
Address	14755 N OUTER FORTY DR
City-State-Zip:	ST LOUIS MO 63017-6050

Title	VPSD
Name	HACKETT, RICHARD C
Address	14755 N OUTER FORTY DR
City-State-Zip:	ST LOUIS MO 63017-6050

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: MARK DOWNAR ASST. SECRETARY 04/18/2014

Electronic Signature of Signing Officer/Director Detail — Date