2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2021
Secretary of State
5896417238CC

DOCUMENT# 855177

Entity Name: HERITAGE CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

7101 COLLEGE BOULEVARD, SUITE 1400
OVERLAND PARK, KS 66210

Current Mailing Address:

7101 COLLEGE BOULEVARD, SUITE 1400
OVERLAND PARK, KS 66210 US

FEI Number: 36-2811124

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	P, DIRECTOR	Title	CFO
Name	KNEELAND, TIMOTHY F	Name	STEILEN, WILLIAM J
Address	7101 COLLEGE BOULEVARD, SUITE 1400	Address	7101 COLLEGE BOULEVARD SUITE 1400
City-State-Zip:	OVERLAND PARK KS 66210	City-State-Zip:	OVERLAND PARK KS 66210
Title	S	Title	T
Name	RUSSELL, KATHLEEN A	Name	KIPPER, JANE B
Address	135 N. PENNSYLVANIA ST, SUITE 1800	Address	7101 COLLEGE BOULEVARD SUITE 1400
City-State-Zip:	INDIANAPOLIS IN 46204	City-State-Zip:	OVERLAND PARK KS 66210
Title	AS	Title	C
Name	LIU, NANCY M	Name	BUENGER, CHARLENE
Address	4800 STREET ROAD, SUITE 140	Address	7101 COLLEGE BOULEVARD, SUITE 1400
City-State-Zip:	TREVOSE PA 19053	City-State-Zip:	OVERLAND PARK KS 66210

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: NANCY M. LIU — ASSISTANT SECRETARY — 01/14/2021

Electronic Signature of Signing Officer/Director Detail — Date