2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2014
Secretary of State
CC3131515580

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Entity Name: PARKER CENTENNIAL ASSURANCE COMPANY

Current Principal Place of Business:

1800 NORTH POINT DRIVE
STEVENS POINT, WI 54481

Current Mailing Address:

1800 NORTH POINT DRIVE
STEVENS POINT, WI 54481

FEI Number: 31-0835312

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	CD
Name	MCPARTLAND, PETER G
Address	1800 NORTH POINT DRIVE
City-State-Zip:	STEVENS POINT WI 54481

Title	D
Name	WEISHAN, JAMES J
Address	1800 NORTH POINT DRIVE
City-State-Zip:	STEVENS POINT WI 54481

Title	VD
Name	WILLIAMS, MICHAEL J
Address	1800 NORTH POINT DRIVE
City-State-Zip:	STEVENS POINT WI 54481

Title	ASST. TREASURER
Name	GANTZ, DWAYNE
Address	1800 NORTH POINT DRIVE
City-State-Zip:	STEVENS POINT WI 54481

Title	PD
Name	HACKL, MARK R
Address	1800 NORTH POINT DRIVE
City-State-Zip:	STEVENS POINT WI 54481

Title	SD
Name	ERLER, KENNETH J
Address	1800 NORTH POINT DRIVE
City-State-Zip:	STEVENS POINT WI 54481

Title	TREASURER, DIRECTOR
Name	SANDERS, CAROL P
Address	1800 NORTH POINT DRIVE
City-State-Zip:	STEVENS POINT WI 54481

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: CAROL P. SANDERS TREASURER,DIRECTOR 04/01/2014

Electronic Signature of Signing Officer/Director Detail — Date