

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000003150

**Entity Name:** NATIONAL SPECIALTY INSURANCE COMPANY

**Current Principal Place of Business:**

1900 L DON DODSON DRIVE  
BEDFORD, TX 76021

**Current Mailing Address:**

1900 L DON DODSON DRIVE  
BEDFORD, TX 76021 US

**FEI Number: 75-2816775**

**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           TREASURER, DIRECTOR, OFFICER  
Name           DUFF, APRIL L.  
Address        1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title           SECRETARY, DIRECTOR, OFFICER  
Name           CLEFF, DAVID M.  
Address        1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title           CEO  
Name           FREEMAN, MATTHEW A.  
Address        1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title           DIRECTOR  
Name           RUSSO, ROBIN  
Address        1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title           ASSISTANT SECRETARY, DIRECTOR,  
                  OFFICER  
Name           GRINNAN, RICHARD R.  
Address        1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title           ASSISTANT SECRETARY, OFFICER  
Name           STRAIT, KARL M.  
Address        1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title           ASSISTANT SECRETARY, OFFICER  
Name           STURGEON, KATHLEEN A.  
Address        1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title           ASSISTANT TREASURER, OFFICER  
Name           BROUSSARD, JUSTIN P.  
Address        1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

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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: DAVID M CLEFF**

**SECRETARY**

**04/14/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASSISTANT TREASURER, OFFICER  
Name NEWCOMER, ROD A.  
Address 1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title ASSISTANT SECRETARY, TAX DIRECTOR,  
OFFICER  
Name PLUSCH, KELLI S.  
Address 1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title ASSISTANT CONTROLLER, OFFICER  
Name MCCHESENEY, SHELLY D.  
Address 1900 L DON DODSON DRIVE  
City-State-Zip: BEDFORD TX 76021

Title ASST. SECRETARY  
Name MCMULLEN, JOE M  
Address 1900 L. DON DODSON DR  
City-State-Zip: BEDFORD TX 76021