## 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007709

Entity Name: ONECIS INSURANCE COMPANY

## **Current Principal Place of Business:**

4343 COMMERCE COURT STE. 120 LISLE, IL 60532

## **Current Mailing Address:**

1601 SAWGRASS CORPORATE PARKWAY STE. 400 FORT LAUDERDALE, FL 33323 US

# FEI Number: 36-2738349

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US FILED Jan 31, 2013 Secretary of State CC1560508162

Certificate of Status Desired: No

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

## Officer/Director Detail :

Officer/Director Detail :				
	Title	PD	Title	CFO, TREASURER
	Name	GUIMARAES, PEDRO	Name	ESNARD, CARLOS
	Address	1601 SAWGRASS CORPORATE PARKWAY	Address	1601 SAWGRASS CORPORATE PARKWAY STE, 400
	City-State-Zip:	FT LAUDERDALE FL 33323	City-State-Zip:	FORT LAUDERDALE FL 33323
	Title	SEC		
	Name	BUSH, HEATHER	Title	VP
	Address	1601 SAWGRASS CORPORATE	Name	MONDELLO, JANICE
		PARKWAY	Address	330 LYNNWAY, SUITE 403
	City-State-Zip:	FT LAUDERDALE FL 33323	City-State-Zip:	LYNN MA 01901
	Title	D	Title	D
	Name	RZONCA, GREGORY F	Name	DONZE, ROBERT W
	Address	1601 SAWGRASS CORPORATE PARKWAY STE. 400	Address	1601 SAWGRASS CORPORATE PARKWAY STE. 400
	City-State-Zip:	FORT LAUDERDALE FL 33323	City-State-Zip:	FORT LAUDERDALE FL 33323
	Title	DIRECTOR	Title	DIRECTOR
	Name	BERGFELD, WHITNEY	Name	MILOSCH, JEFFEREY
	Address	1601 SAWGRASS CORPORATE PARKWAY STE. 400	Address	1601 SAWGRASS CORPORATE PARKWAY STE. 400
	City-State-Zip:	FORT LAUDERDALE FL 33323	City-State-Zip:	FORT LAUDERDALE FL 33323

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: HEATHER BUSH SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date