

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000007709

**FILED**  
**Jan 07, 2014**  
**Secretary of State**  
**CC6244060911**

**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

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 PD  
Name GUIMARAES, PEDRO  
Address 1601 SAWGRASS CORPORATE PARKWAY  
City-State-Zip: FT LAUDERDALE FL 33323

Title CFO, TREASURER  
Name ESNARD, CARLOS  
Address 1601 SAWGRASS CORPORATE PARKWAY STE. 400  
City-State-Zip: FORT LAUDERDALE FL 33323

Title SEC  
Name BUSH, HEATHER  
Address 1601 SAWGRASS CORPORATE PARKWAY  
City-State-Zip: FT LAUDERDALE FL 33323

Title VP  
Name MONDELLO, JANICE  
Address 330 LYNNWAY, SUITE 403  
City-State-Zip: LYNN MA 01901

Title D  
Name RZONCA, GREGORY F  
Address 1601 SAWGRASS CORPORATE PARKWAY STE. 400  
City-State-Zip: FORT LAUDERDALE FL 33323

Title D  
Name DONZE, ROBERT W  
Address 1601 SAWGRASS CORPORATE PARKWAY STE. 400  
City-State-Zip: FORT LAUDERDALE FL 33323

Title DIRECTOR  
Name BERGFELD, WHITNEY  
Address 1601 SAWGRASS CORPORATE PARKWAY STE. 400  
City-State-Zip: FORT LAUDERDALE FL 33323

Title DIRECTOR  
Name HARVEY, THOMAS R.  
Address 1601 SAWGRASS CORPORATE PARKWAY STE. 400  
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 B. BUSH

**SECRETARY**

**01/07/2014**

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

\_\_\_\_\_  
Date