

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001005

Entity Name: ENVISION INSURANCE COMPANY

Current Principal Place of Business:

2181 E AURORA ROAD
TWINSBURG, OH 44087

Current Mailing Address:

2181 E AURORA ROAD
TWINSBURG, OH 44087

FEI Number: 20-4308924

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
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 PRESIDENT, DIRECTOR
Name EPLING, WILLIAM CARL
Address 2181 E AURORA ROAD
City-State-Zip: TWINSBURG OH 44087

Title CFO, D, EVP
Name WELSH, THOMAS JOHN
Address 2181 E AURORA ROAD
City-State-Zip: TWINSBURG OH 85226

Title CEO, DIRECTOR
Name SHEEHY, FRANK JOHN
Address 2181 EAST AURORA ROAD
City-State-Zip: TWINSBURG OH 44087

Title SR. VP, GENERAL COUNSEL AND
SECRETARY
Name WEINBERG, ROBERT BURNS
Address 2181 E AURORA ROAD
City-State-Zip: TWINSBURG OH 44087

Title DIRECTOR
Name KARST, DARREN WAYNE
Address 30 HUNTER LANE
City-State-Zip: CAMP HILL PA 17011

Title DIRECTOR
Name BLACK, KENNETH CHARLES
Address 30 HUNTER LANE
City-State-Zip: CAMP HILL PA 17011

Title DIRECTOR
Name CRAWFORD, KERMIT RAY
Address 30 HUNTER LANE
City-State-Zip: CAMP HILL PA 17011

Title DIRECTOR
Name SCHROEDER, MATTHEW CHARLES
Address 30 HUNTER LANE
City-State-Zip: CAMP HILL PA 17011

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: WILLIAM EPLING

PRESIDENT

04/02/2018

Electronic Signature of Signing Officer/Director Detail

Date