

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000002691

Entity Name: AMICA PROPERTY AND CASUALTY INSURANCE COMPANY**Current Principal Place of Business:**100 AMICA WAY
LINCOLN, RI 02865**Current Mailing Address:**P.O. BOX 6008
PROVIDENCE, RI 02940 US**FEI Number:** 26-0115568**Certificate of Status Desired:** Yes**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 OSVP
Name DECUBELLIS, LISA M
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title SVP AND CHIEF INFORMATION
OFFICER
Name MOREAU, PETER F
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title SR. ASSTANT VICE PRESIDENT AND
SECRETARY
Name CASEY, SUZANNE E
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title PRESIDENT, CEO, CHAIRMAN,
DIRECTOR
Name DIMUCCIO, ROBERT A
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title D
Name CHADWICK, PATRICIA W
Address 31 HILLCREST PARK RD
City-State-Zip: OLD GREENWICH CT 06870

Title D
Name AIKEN, JEFFREY P
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title CHIEF OPERATIONS OFFICER
Name MURPHY, THEODORE C
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title SVP, CFO, TREASURER
Name LORING, JAMES P JR.
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Continues on page 2

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: SUZANNE E. CASEY**SR. AVP & SECRETARY****03/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP AND CHIEF INVESTMENT OFFICER
Name BENSON, ROBERT K
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title O/SVP
Name BUSSIERE, JAMES A
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title O/SVP
Name ANDY, JILL H
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title D
Name HITTNER, BARRY G
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title D
Name REAVES, DONALD J
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title D
Name AVERY, JILL J
Address MORGAN HALL T69
SOLDIERS FIELD RD
City-State-Zip: BOSTON MA 02163

Title DIRECTOR
Name SOUZA, DIANE
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title SVP AND GENERAL COUNSEL
Name SUGLIA, ROBERT P
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title O/SVP
Name WELCH, SEAN F
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title D
Name MACHTLEY, RONALD K
Address 1150 DOUGLAS PIKE
City-State-Zip: SMITHFIELD RI 02917

Title D
Name JEANS, MICHAEL D
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title D
Name CANALES, DEBRA A
Address 1801 LIND AVE SW
City-State-Zip: RENTON FL 98057

Title DIRECTOR
Name PAUL, DEBRA
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865

Title DIRECTOR
Name MARINO, PETER
Address 100 AMICA WAY
City-State-Zip: LINCOLN RI 02865