

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000002674

Entity Name: KEYSTONE INSURERS GROUP, INC.

Current Principal Place of Business:

1995 POINT TOWNSHIP DR
NORTHUMBERLAND, PA 17857

Current Mailing Address:

1995 POINT TOWNSHIP DR
NORTHUMBERLAND, PA 17857 US

FEI Number: 23-2263940

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 CS
Name NAGINEY, ROBERT
Address PO BOX 72
City-State-Zip: NORTHUMBERLAND PA 17857

Title MBR
Name DE YULIS, CARL
Address PO BOX 90
City-State-Zip: EBENSBURG PA 15931

Title MBR
Name DUNCAN, JOHN JR
Address 370 MAUS DR
City-State-Zip: NORTH HUNTINGDON PA 15642

Title MBR
Name PARKINS, THOMAS
Address 300 ALLEGHENY RIVER BLVD
City-State-Zip: OAKMONT PA 15139

Title MBR
Name TROUTMAN, THOMAS
Address PO BOX B
City-State-Zip: ELIZABETHVILLE PA 17023

Title MBR
Name ROADMAN, TODD
Address PO BOX 640
City-State-Zip: BEDFORD PA 15522

Title MBR
Name SNIPES, DAL
Address PO BOX 72
City-State-Zip: NORTHUMBERLAND PA 17857

Title MBR
Name DOWNER, DOUG
Address 781 PINE ST
City-State-Zip: HERNDON VA 20170

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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: LEA ANN HAWK

COO

02/17/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title MBR
Name SCHULTHEIS, BRETT
Address PO BOX 2728
City-State-Zip: EVANSVILLE IN 47728

Title MBR
Name LATTA, BILL
Address 201-B N MAIN ST
City-State-Zip: HENDERSON KY 42420

Title CFO/T
Name AZAR, MICHAEL J
Address 1995 POINT TOWNSHIP DR
City-State-Zip: NORTHUMBERLAND PA 17857

Title VP
Name JOYCE, JOSEPH P
Address 1995 POINT TOWNSHIP DR
City-State-Zip: NORTHUMBERLAND PA 17857

Title DIRECTOR
Name FLACK, TRIPP
Address 229 FOX RUN RD.
City-State-Zip: FOREST CITY NC 28043

Title MBR
Name SCHLOTMAN, CARL
Address PO BOX 72
City-State-Zip: NORTHUMBERLAND PA 17857

Title OCEI
Name BOEDKER, DAVIE E
Address 1995 POINT TOWNSHIP DR
City-State-Zip: NORTHUMBERLAND PA 17857

Title VP
Name WYNNE, GEORGE C
Address 1995 POINT TOWNSHIP DR
City-State-Zip: NORTHUMBERLAND PA 17857

Title COO
Name HAWK, LEA ANN
Address 1995 POINT TOWNSHIP DR
City-State-Zip: NORTHUMBERLAND PA 17857