#### **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F9400001377

Entity Name: OLD REPUBLIC INSURED AUTOMOTIVE SERVICES, INC.

**FILED** Jun 03, 2020 Secretary of State 2883727487CC

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

8282 S MEMORIAL DRIVE

STE 202

TULSA, OK 74133-4352

# **Current Mailing Address:**

8282 S MEMORIAL DRIVE

STE 202

TULSA, OK 74133-4352 US

FEI Number: 73-1030486 Certificate of Status Desired: No

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

1201 HAYS STREET

SUITE 105

TALLAHASSEE, FL 32301 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** Title DIRECTOR

Name CESCON, MICHAEL L Name HEITKAMP, JOHN R JR.

8282 S MEMORIAL DRIVE STE 202 8282 S MEMORIAL DRIVE STE 202 Address Address

City-State-Zip: **TULSA OK 74133** City-State-Zip: TULSA OK 74133-4352

SVP, CONPTROLLER Title SVP Title

Name GANT, MARY A BOONE, CHARLES S Name

Address 8282 S MEMORIAL DRIVE STE 202 Address 8282 S. MEMORIAL DRIVE STE 202

City-State-Zip: TULSA OK 74133-4352 City-State-Zip: TULSA OK 74133-4352

Title VР CFO, DIRECTOR Title

PARKS, CYNTHIA M. Name Name MUELLER, KARL W

Address 8282 S MEMORIAL DRIVE Address 8282 S MEMORIAL DRIVE STE 202 STE 202

City-State-Zip: TULSA OK 74133-4352

TULSA OK 74133-4352 City-State-Zip:

Title VΡ

Title VΡ Name DAVIS, ROBERT M. GRAY, WILLIAM TODD Name

8282 S MEMORIAL DRIVE Address Address 8282 S MEMORIAL DRIVE

STE 202 STE 202

City-State-Zip: TULSA OK 74133-4352 City-State-Zip: TULSA OK 74133-4352

### 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: GANT, MARY A

SVP/CONTROLLER

06/03/2020

# Officer/Director Detail Continued:

Title DIRECTOR

Name SMIDDY, CRAIG RICHARD

8282 S MEMORIAL DRIVE STE 202 Address

City-State-Zip: TULSA OK 74133