

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000005183

**Entity Name:** PROASSURANCE CASUALTY COMPANY

**Current Principal Place of Business:**

100 BROOKWOOD PLACE  
BIRMINGHAM, AL 35209

**Current Mailing Address:**

100 BROOKWOOD PLACE  
BIRMINGHAM, AL 35209 US

**FEI Number: 38-2317569**

**Certificate of Status Desired: No**

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

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST  
TALLAHASSEE, FL 32399-0000 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 ASSISTANT SECRETARY, DIRECTOR  
Name LISENBY, JEFFREY P  
Address 100 BROOKWOOD PL  
City-State-Zip: BIRMINGHAM AL 35209

Title PRESIDENT, DIRECTOR  
Name BOGUSKI, MICHAEL L.  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title S  
Name NEVILLE, KATHRYN A  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title SENIOR VICE PRESIDENT  
Name BOWLBY, JEFFREY L  
Address 100 BROOKWOOD PL  
City-State-Zip: BIRMINGHAM AL 35209

Title SENIOR VICE PRESIDENT, DIRECTOR  
Name THOMAS, DARRYL K  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title DIRECTOR, CHAIRMAN, ASST. TREASURER  
Name RAND, EDWARD LJR.  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title DIRECTOR  
Name SEVERYN, MICHAEL A  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title EXECUTIVE VICE PRESIDENT, ASST. SECRETARY, DIRECTOR  
Name FRANCIS, ROBERT D.  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

**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: KATHRYN A. NEVILLE**

**SECRETARY**

**05/01/2021**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name COCHRAN, LAWRENCE K  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title SENIOR VICE PRESIDENT  
Name WHITESIDE, HAYES V MD  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title ASSISTANT TREASURER  
Name DANIEL, W. JOHNATHAN  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title SENIOR VICE PRESIDENT  
Name CARLILE, KAREN S.B.  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title SENIOR VICE PRESIDENT  
Name MUSGRAVE, CRAIG G.  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title SENIOR VICE PRESIDENT  
Name TAPASAK, SHEPHERD M.  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title TREASURER  
Name HENDRICKS, DANA S.  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209

Title SENIOR VICE PRESIDENT  
Name BERISHA, SOKOL  
Address 100 BROOKWOOD PLACE  
City-State-Zip: BIRMINGHAM AL 35209