

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18209

Entity Name: INDIANA LUMBERMENS MUTUAL INSURANCE COMPANY

Current Principal Place of Business:

2005 MARKET STREET
SUITE 1200
PHILADELPHIA, PA 19103

Current Mailing Address:

2005 MARKET STREET
SUITE 1200
PHILADELPHIA, PA 19103 US

FEI Number: 35-0410420

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 PRESIDENT
Name SMITH, JOHN K
Address ONE COMMERCE SQUARE
 2005 MARKET STREET, SUITE 1200
City-State-Zip: PHILADELPHIA PA 19103

Title TREASURER
Name MARAZZO, JOHN F
Address ONE COMMERCE SQUARE
 2005 MARKET STREET, SUITE 1200
City-State-Zip: PHILADELPHIA PA 19103

Title SECRETARY
Name HAROLD, JAMISON L
Address ONE COMMERCE SQUARE
 2005 MARKET STREET, SUITE 1200
City-State-Zip: PHILADELPHIA PA 19103

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: JOHN MARAZZO

VP-
ACCOUNTING/TREASURE
R

03/08/2018

Electronic Signature of Signing Officer/Director Detail

Date