

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30651

FILED
May 01, 2013
Secretary of State
CC2544575805

Entity Name: USF INSURANCE COMPANY

Current Principal Place of Business:

30833 NORTHWESTERN HWY.
220
FARMINGTON HILLS, MI 48334

Current Mailing Address:

30833 NORTHWESTERN HWY.
220
FARMINGTON HILLS, MI 48334 US

FEI Number: 23-0597040

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
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 PD
Name MULDOWNNEY, DANIEL T
Address 30833 NORTHWESTERN HWY, STE.
220
City-State-Zip: FARMINGTON HILLS MI 48334

Title CD
Name KAUFMAN, ALAN J
Address 30833 NORTHWESTERN HWY
City-State-Zip: FARMINGTON HILLS MI 48334

Title S
Name HECKEL, MARILYN
Address 30833 NORTHWESTERN HWY, STE.
220
City-State-Zip: FARMINGTON HILLS MI 48334

Title T
Name MARTIN, MICHAEL O
Address 30833 NORTHWESTER HWY, STE. 220
City-State-Zip: FARMINGTON HILLS MI 48334

Title D
Name PRICE, DAVID J
Address 30833 NORTHWESTERN HWY
City-State-Zip: FARMINGTON HILLS MI 48334

Title D
Name MUNSON, WILLIAM L
Address 762 ALBEMARLE ST
City-State-Zip: WYCKOFF NJ 07481

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: MICHAEL MARTIN

TREASURER

05/01/2013

Electronic Signature of Signing Officer/Director Detail

Date