## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 805733** 

**Entity Name: BITCO NATIONAL INSURANCE COMPANY** 

**Current Principal Place of Business:** 

C/O DENNIS VANDERVINNE 3700 MARKET SQUARE CIRCLE DAVENPORT, IA 52807

## **Current Mailing Address:**

C/O DENNIS VANDERVINNE 3700 MARKET SQUARE CIRCLE DAVENPORT, IA 52807 US

FEI Number: 36-6054328 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COONROD, STEPHEN 1709 HERMITAGE BLVD., SUITE 200 TALLAHASSEE, FL 32308 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: STEPHEN COONROD 01/15/2018

Electronic Signature of Registered Agent

Date

FILED Jan 15, 2018

**Secretary of State** 

CC3063389405

## Officer/Director Detail:

Title V Title F

Name JORGENSON, MARK Name LAMB, VINCENT C

Address 3700 MARKET SQUARE CIRCLE Address 3700 MARKET SQUARE CIRCLE

City-State-Zip: DAVENPORT IA 52807 City-State-Zip: DAVENPORT IA 52807

Title VT Title V

Name VANDERVINNE, DENNIS Name PAULUS, LORI

Address 3700 MARKET SQUARE CIRCLE Address 3700 MARKET SQUARE CIRCLE

City-State-Zip: DAVENPORT IA 52807 City-State-Zip: DAVENPORT IA 52807

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: DENNIS VANDERVINNE

SR. V.P. & TREASURER

01/15/2018