

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003497

Entity Name: FNC INSURANCE AGENCY, INC.

Current Principal Place of Business:

14700 CITICORP DRIVE
HAGERSTOWN, MD 21740

Current Mailing Address:

PO BOX 30509
TAX & REPORTING
TAMPA, FL 33631

FEI Number: 94-2571325

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 P/D
Name HESS, BARRY W
Address 6400 LAS COLINAS BLVD
City-State-Zip: IRVING TX 75039

Title TREASURER, CFO
Name LOWE, ROBIN N
Address 1000 TECHNOLOGY DRIVE
City-State-Zip: O'FALLON MO 63368

Title VP/S
Name BOYHER, JEFFERY L
Address 1000 TECHNOLOGY DRIVE
City-State-Zip: O'FALLON MO 63368

Title VP
Name HOFFMAN, LISA A
Address 3800 CITIGROUP CENTER DR
City-State-Zip: TAMPA FL 33610

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: LISA A HOFFMAN

VICE PRESIDENT

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date