

2015 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F12000002213

FILED
Aug 12, 2015
Secretary of State
CC7257172806

Entity Name: OBI NATIONAL INSURANCE COMPANY

Current Principal Place of Business:

605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
PLYMOUTH, MN 55441

Current Mailing Address:

605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
PLYMOUTH, MN 55441 US

FEI Number: 45-2871218

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E GAINES ST
TALLAHASSEE, FL 32399 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 C, PRESIDENT, CEO
Name MILLER, T MICHAEL
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

Title D, CFO, OFFICER
Name MCDONOUGH, PAUL H
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

Title D, VP, ASST. SECRETARY
Name GEDDES, JOAN K
Address 150 ROYALL ST
City-State-Zip: CANTON MA 02021

Title TREASURER
Name TREACY, JOHN C
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

Title DIRECTOR
Name CROSBY, DENNIS A.
Address 1720 WINDWARD CONCOURSE
SUITE 325
City-State-Zip: ALPHARETTA GA 30005

Title DIRECTOR, OFFICER
Name DUFFY, SEAN W.
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

Title DIRECTOR, OFFICER
Name KIEL, JOSETTE D.
Address THE FORUM
8000 IH-10 WEST SUITE 1045
City-State-Zip: SAN ANTONIO TX 78230

Title DIRECTOR, OFFICER
Name PHILLIPS, MAUREEN A.
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

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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: CHRISTOPHER V JERRY

SECRETARY

08/12/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, OFFICER
Name POOLE, BRIAN D.
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

Title DIRECTOR, OFFICER
Name SCHMITT, THOMAS N.
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

Title SEC
Name JERRY, CHRISTOPHER V
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

Title DIRECTOR, OFFICER
Name MCCLINTOCK, SCOTT W.
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441

Title OFFICER
Name BREHM, PAUL J.
Address 605 WATERFORD PARK
605 HIGHWAY 169 NORTH SUITE 800
City-State-Zip: PLYMOUTH MN 55441