

2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000145524

Entity Name: FD INSURANCE COMPANY**Current Principal Place of Business:**4651 SALISBURY RD STE 410
JACKSONVILLE, FL 32256**Current Mailing Address:**4651 SALISBURY RD STE 410
JACKSONVILLE, FL 32256 US**FEI Number:** 20-3704679**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
GAINES STREET
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 DIRECTOR
Name BERETTA, SANDRA L. DR.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title VC
Name DAILEY, PATRICIA A. DR.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name GANNON, ALICE H.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name PACKER, STEVEN DR.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name COBARRUBIAS, FABIOLA DR.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR, PRESIDENT, & CHIEF
EXECUTIVE OFFICER
Name DIENER, THEODORE SCOTT
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name HAYASHI, ROGER M. DR.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name PATCHIN, REBECCA J. DR.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

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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: KARA M. RICCISVP, CLO, CCO &
CORPORATE
SECRETARY

11/01/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SYPHAX, SCOTT C.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title SVP, CHIEF LEGAL OFFICER, CORPORATE
SECRETARY, AND CHIEF COMPLIANCE OFFICER
Name RICCI, KARA M.
Address 575 MARKET STREET
SUITE 1000
City-State-Zip: SAN FRANCISCO CA 94105

Title VP, FINANCE & CONTROLLER
Name MEISEL, DENNIS ALLAN
Address 1700 BENT CREEK BOULEVARD
City-State-Zip: MECHANICSBURG PA 17055

Title SVP & CHIEF FINANCIAL OFFICER
Name JOHNSON, MARK D.
Address 6034 WEST COURTYARD DR.
STE. 310
City-State-Zip: AUSTIN TX 78730

Title SVP & CHIEF BUSINESS
DEVELOPMENT OFFICER
Name RUMIN, RONALD C.
Address 6034 WEST COURTYARD DR.
STE. 310
City-State-Zip: AUSTIN TX 78730