

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000145524

**Entity Name:** FD INSURANCE COMPANY**Current Principal Place of Business:**4651 SALISBURY ROAD, SUITE 410  
JACKSONVILLE, FL 32256**Current Mailing Address:**PO BOX 2080  
MECHANICSBURG, PA 17055 US**FEI Number:** 20-3704679**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**C T 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 DIRECTOR  
Name BERETTA, SANDRA L. DR.  
Address PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title DIRECTOR  
Name COBARRUBIAS, FABIOLA DR.  
Address PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title DIRECTOR, PRESIDENT, & CHIEF  
EXECUTIVE OFFICER  
Name DIENER, THEODORE SCOTT  
Address PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title DIRECTOR  
Name GANNON, ALICE H.  
Address PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title DIRECTOR  
Name HAYASHI, ROGER M. DR.  
Address PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title DIRECTOR  
Name PACKER, STEVEN DR.  
Address PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title DIRECTOR  
Name PATCHIN, REBECCA J. DR.  
Address PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title DIRECTOR  
Name SYPHAX, SCOTT C.  
Address PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

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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:** KELLIE N. SORENSONSVP, CHIEF LEGAL  
OFFICER, CORPORATE  
SECRETARY, AND CHIEF  
COMPLIANCE OFFICER

06/18/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           SVP & CHIEF FINANCIAL OFFICER  
Name           JOHNSON, MARK D.  
Address        PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title           SVP & CHIEF OPERATING OFFICER  
Name           RUMIN, RONALD C.  
Address        PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title           SVP, CHIEF LEGAL OFFICER,  
CORPORATE SECRETARY, AND CHIEF  
COMPLIANCE OFFICER  
Name           SORENSEN, KELLIE N.  
Address        PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055

Title           VP, FINANCE & CONTROLLER  
Name           MEISEL, DENNIS ALLAN  
Address        PO BOX 2080  
City-State-Zip: MECHANICSBURG PA 17055