

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213534384

1.) CORPORATION NAME:

**Progressive Paloverde Insurance Company**

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA**

SCC ID NO: **F1563040**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	450

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**IN**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: c/o CT Corporation Systems  
251 East Ohio Street, Ste. 1100

CITY/ST/ZIP: Indianapolis, IN 46204

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	STEVE BROZ				
TITLE:	PRESIDENT				
ADDRESS:	C/O CT CORPORATION SYSTEMS 251 EAST OHIO STREET, STE. 1100				
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46204				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	JAMES R. HAAS				
TITLE:	VICE PRESIDENT				
ADDRESS:	C/O CT CORPORATION SYSTEMS 251 EAST OHIO STREET, STE. 1100				
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46204				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	Daniel Witalec				
TITLE:	TREASURER				
ADDRESS:	C/O CT CORPORATION SYSTEMS 251 EAST OHIO STREET, STE. 1100				
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46204				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	KAREN A. KOSUDA				
TITLE:	ASST SECRETARY				
ADDRESS:	C/O CT CORPORATION SYSTEMS 251 EAST OHIO STREET, STE. 1100				
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46204				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	MICHAEL R. UTH				
TITLE:	SECRETARY				
ADDRESS:	C/O CT CORPORATION SYSTEMS 251 EAST OHIO STREET, STE. 1100				
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46204				

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ KAREN A. KOSUDA</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>KAREN A. KOSUDA, ASST SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>7/24/2013</u> DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.