

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854240

FILED
May 02, 2016
Secretary of State
CC4655591327

Entity Name: HERITAGE INDEMNITY COMPANY

Current Principal Place of Business:

7125 W. JEFFERSON AVE.
SUITE 200
LAKEWOOD, CO 80235

Current Mailing Address:

800 SUPERIOR AVE E, 21ST FL
CLEVELAND, OH 44114 US

FEI Number: 95-3553435

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 ASSISTANT SECRETARY
Name BERMAN, JAY H
Address 610 FOX FIELDS ROAD
City-State-Zip: BRYN MAWR PA 19010

Title VICE PRESIDENT
Name BRANDT, STEPHEN
Address 12790 MERRIT DRIVE
SUITE 200
City-State-Zip: DALLAS TX 75251

Title DIRECTOR, VICE PRESIDENT
Name HOLLANDER, STUART
Address 59 MAIDEN LANE, 43RD FL
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name KARKOWSKY, ADAM
Address 59 MAIDEN LANE, 43RD FL
City-State-Zip: NEW YORK NY 10038

Title CHIEF ACTUARY
Name MAYER, JEFFREY
Address 59 MAIDEN LANE, 43RD FL
City-State-Zip: NEW YORK NY 10038

Title ASSISTANT SECRETARY, VICE PRESIDENT, DIRECTOR
Name MOSES, BARRY
Address 800 SUPERIOR AVE E, 21ST FL
City-State-Zip: CLEVELAND OH 44114

Title DIRECTOR, PRESIDENT
Name POPE, ADAM
Address 7125 W JEFFERSON AVE, STE 200
City-State-Zip: LAKEWOOD CO 80235

Title DIRECTOR, TREASURER
Name SCHLACHTER, HARRY
Address 59 MAIDEN LANE, 43RD FL
City-State-Zip: NEW YORK NY 10038

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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: STEPHEN UNGAR

SECRETARY

05/02/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, SECRETARY
Name UNGAR , STEPHEN
Address 59 MAIDEN LANE, 43RD FL
City-State-Zip: NEW YORK NY 10038