

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036008

**FILED
Feb 24, 2015
Secretary of State
CC8625843970**

Entity Name: EDISON INSURANCE COMPANY

Current Principal Place of Business:

903 NW 65TH ST
SUITE 200
BOCA RATON, FL 33487

Current Mailing Address:

903 NW 65TH ST
SUITE 200
BOCA RATON, FL 33487

FEI Number: 20-2742404

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
PROCESS SECTION
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 D
Name DESJADON, ROGER
Address 6 TERHUNE CT
City-State-Zip: FRANKLIN PARK NJ 08823

Title D
Name ADKINS, PAUL
Address 18743 LONG LAKE DR
City-State-Zip: BOCA RATON FL 33496

Title D
Name GIULIANTI, STACEY A
Address 903 NW 65 ST
SUITE 200
City-State-Zip: BOCA RATON FL 33487

Title D
Name LATTANZIO, FRANCIS
Address 85 FARMCLIFF DR
City-State-Zip: GLASTONBURY CT 06033

Title D
Name CANTOR, GARY
Address 903 NW 65 STREET
SUITE 200
City-State-Zip: BOCA RATON FL 33487

Title D
Name STRAUCH, CLINT
Address 3317 NE 30 AVE
City-State-Zip: LIGHTHOUSE POINT FL 33064

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: STACEY A GIULIANTI

CORP SEC

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date