

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000122470

**Entity Name:** BLUE ATLANTIC REINSURANCE CORPORATION

**Current Principal Place of Business:**

1110 W COMMERCIAL BLVD  
FT LAUDERDALE, FL 33309

**Current Mailing Address:**

1110W COMMERCIAL BLVD  
FT LAUDERDALE, FL 33309

**FEI Number:** 26-1582700

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

WILCOX, FRANK C  
1110 W COMMERCIAL BLVD  
FT LAUDERDALE, FL 33309 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:** FRANK C WILCOX

03/15/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN AND CEO  
Name DOWNES, SEAN P  
Address 1110 W COMMERCIAL BLVD  
City-State-Zip: FT LAUDERDALE FL 33309

Title PRESIDENT AND CHIEF RISK  
OFFICER  
Name SPRINGER, JON W  
Address 1110 W COMMERCIAL BLVD  
City-State-Zip: FT LAUDERDALE FL 33309

Title COO  
Name DONAGHY, STEPHEN J  
Address 1110 W COMMERCIAL BLVD  
City-State-Zip: FT LAUDERDALE FL 33309

*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 J DONAGHY

COO

03/15/2019

Electronic Signature of Signing Officer/Director Detail

Date