2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 814854

Entity Name: SELECT INSURANCE COMPANY

Current Principal Place of Business:

1301 EAST COLLINS BOULEVARD RICHARDSON, TX 75081

Current Mailing Address:

ONE TOWER SQUARE HARTFORD, CT 06183 US

FEI Number: 75-6013697 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES STREET TALLAHASSEE, FL 32399-0000 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:

Date Electronic Signature of Registered Agent

Name

Officer/Director Detail :

Title DIRECTOR, PRESIDENT, CHAIRMAN, Title DIRECTOR, VC, CFO

CEO

MACLEAN, BRIAN W Name Address ONE TOWER SQUARE ONE TOWER SQUARE

Address HARTFORD CT 06183 City-State-Zip: City-State-Zip: HARTFORD CT 06183

Title DIRECTOR, VC, CHIEF INVESTMENT **OFFICER**

HEYMAN, WILLIAM H

Name

485 LEXINGTON AVENUE Address

SUITE 400

City-State-Zip: NEW YORK NY 10017-2630

CORPORATE SECRETARY

Title

SKJERVEN, WENDY C Name

385 WASHINGTON STREET Address

City-State-Zip: ST. PAUL MN 55102

Title **DIRECTOR**

Name KLEIN, MICHAEL F.

Address ONE TOWER SQUARE

City-State-Zip: HARTFORD CT 06183

Title ASSISTANT CORPORATE

SECRETARY

BENET, JAY S

Name MULCAHY, ANN B.

ONE TOWER SQUARE Address

City-State-Zip: HARTFORD CT 06183

TREASURER, EXECUTIVE VICE Title

PRESIDENT

Name OLIVO, MARIA

Address 485 LEXINGTON AVENUE

SUITE 400

City-State-Zip: NEW YORK NY 10017-2630

Title DIRECTOR, EXECUTIVE VICE

PRESIDENT, GENERAL COUNSEL

FILED Mar 27, 2018

Secretary of State

CC5530490653

Name SPENCE, KENNETH F. III

Address 385 WASHINGTON STREET

City-State-Zip: ST. PAUL MN 55102

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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.

03/27/2018 SIGNATURE: ANN B. MULCAHY ASSISTANT CORPORATE SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR, VP Title DIRECTOR

Name FARBER, ANDREW J. Name TOCZYDLOWSKI, GREGORY C.

Address ONE TOWER SQUARE Address ONE TOWER SQUARE

City-State-Zip: HARTFORD CT 06183

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