## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 825960** 

**Entity Name: LAMORAK INSURANCE COMPANY** 

**Current Principal Place of Business:** 

1880 JFK BOULEVARD SUITE 801 PHILADELPHIA, PA 19103

Apr 26, 2016 **Secretary of State** CC3802255995

**FILED** 

## **Current Mailing Address:**

1880 JFK BOULEVARD **SUITE 801** PHILADELPHIA, PA 19103 US

FEI Number: 04-2475442 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST 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:

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

**PRESIDENT** Title Title **SECRETARY** 

HOCH, STANDLEY RICHARDS, PAULINE Name Name

1880 JFK BOULEVARD Address 1880 JFK BOULEVARD Address

SUITE 801 SUITE 801

PHILADELPHIA PA 19103 PHILADELPHIA PA 19103 City-State-Zip: City-State-Zip:

Title **TREASURER** Title ASST. SECRETARY SCHLEIDER, BRIAN TERRI, WEAVER Name Name

1880 JFK BOULEVARD 1880 JFK BOULEVARD Address Address SUITE 801

SUITE 801

PHILADELPHIA PA 19103 PHILADELPHIA PA 19103 City-State-Zip: City-State-Zip:

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: TERRI R.WEAVER

ASSISTANT SECRETARY

04/26/2016