## **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 844332** 

**Entity Name: AMEX ASSURANCE COMPANY** 

**Current Principal Place of Business:** 

18850 N 56TH ST

PHOENIX, AZ 85054

**Current Mailing Address:** 

18850 N 56TH ST

PHOENIX, AZ 85054 US

FEI Number: 36-2760101 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHOENIX AZ 85054

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** May 31, 2020

Secretary of State

4749252831CC

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

BERNDT, MARIAN RAFAEL BODENSTEINER, TERRY PATRICK Name Name

Address 18850 N Address 18850 N 56TH ST

56TH ST

PHOENIX AZ 85054

PHOENIX AZ 85054 PHOENIX AZ 85054 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title DIRECTOR

DOUGLAS, KATHARINE BRIDGET GIGLIO, JAIMIE ANN Name Name

18850 N 18850 N Address Address 56TH ST

56TH ST

Title **DIRECTOR** Title **DIRECTOR** 

RAINER III, LUTHER JEREMY LOLLI, CHRISTOPHER JOSEPH Name Name

18850 N 18850 N Address Address

56TH ST 56TH ST

PHOENIX AZ 85054 PHOENIX AZ 85054 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR** 

Name MOORE, JONATHAN THOMAS Name POND, GREGORY MAUGHAN

18850 N 18850 N Address Address 56TH ST 56TH ST

PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

## Continues on page 2

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.

05/31/2020 SIGNATURE: MARK W. MUSSER SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title **DIRECTOR** 

Name STEVENS, KELLY DAWN Name

Address 18850 N

56TH ST

PHOENIX AZ 85054 City-State-Zip:

Title **PRESIDENT** 

Name POND, GREGORY MAUGHAN

Address 18850 N

56TH ST

City-State-Zip: PHOENIX AZ 85054

**TREASURER** Title

Name DOUGLAS, KATHARINE BRIDGET

Address 18850 N

56TH ST

City-State-Zip: PHOENIX AZ 85054

Title DIRECTOR

TERESA, LORENZO SORIANO DE

Address 18850 N

56TH ST

City-State-Zip: PHOENIX AZ 85054

Title SECRETARY

Name MUSSER, MARK W.

Address 18850 N

56TH ST

City-State-Zip: PHOENIX AZ 85054