## 2016 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 858336** 

**Entity Name: STANDARD GUARANTY INSURANCE COMPANY** 

**Current Principal Place of Business:** 

260 INTERSTATE NORTH CIR. SE ATLANTA. GA 30339-2210

## **Current Mailing Address:**

260 INTERSTATE NORTH CIR. SE ATLANTA. GA 30339-2210 US

FEI Number: 58-1529579 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

FILED May 17, 2016

**Secretary of State** 

CC8097495421

Officer/Director Detail:

Title DIRECTOR Title SECRETARY

NameTAN, TRACY XIANGYANNameARAGON-CRUZ, JEANNIEAddress260 INTERSTATE NORTH CIR. SEAddress11222 QUAIL ROOST DRIVE

City-State-Zip: ATLANTA GA 30339 City-State-Zip: MIAMI FL 33157

Title DIRECTOR Title DIRECTOR

Name HARRINGTON, ROBBIE Name TURNER, GARY

Address 260 INTERSTATE NORTH CIR. SE Address 260 INTERSTATE NORTH CIR. SE

City-State-Zip: ATLANTA GA 30339-2210 City-State-Zip: ATLANTA GA 30339-2210

Title TREASURER Title PRESIDENT

Name TURNER, BEECH Name FROBOSE, JOHN AUGUST

Address 260 INTERSTATE NORTH CIRCLE, SE Address 260 INTERSTATE NORTH CIR. SE

City-State-Zip: ATLANTA GA 30339-2210

Title DIRECTOR

Title DIRECTOR Name LOPEZ-MORLAES, IVAN C

Name LEMASTERS, STEVEN CRAIG
Address 260 INTERSTATE NORTH CIR. SE

City-State-Zip: ATLANTA GA 30339-2210

City-State-Zip: ATLANTA GA 30339-2210

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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.

SIGNATURE: JEANNIE AMY ARAGON-CRUZ

**SECRETARY** 

05/17/2016

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name KIRSCH, RUSSELL GARY
Address 11222 QUAIL ROOST DRIVE

City-State-Zip: MIAMI FL 33157