

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001427

Entity Name: PROFESSIONAL INDEMNITY AGENCY, INC.**Current Principal Place of Business:**37 RADIO CIRCLE DRIVE
MOUNT KISCO, NY 10549-5000**Current Mailing Address:**37 RADIO CIRCLE DRIVE
MOUNT KISCO, NY 10549-5000 US**FEI Number: 13-2918810****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NRAI SERVICES, INC
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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP, TREASURER
Name LEE, JONATHAN
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title DIRECTOR
Name BROCK, SHARON
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title DIRECTOR
Name RIVERA, SUSAN
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title DIRECTOR
Name WEIST, THOMAS E.
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title PRESIDENT
Name ROBIN, RICHARD
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title CFO
Name DAVIS, NIKKI
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title VP
Name CURTIN, SEAN T.
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title VP
Name HICKOX, JENNIFER
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

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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: ALEXANDER LUDLOW**SECRETARY****05/30/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP, DIRECTOR
Name HUBBARD, WILLIAM F.
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title VP
Name KIDDER, WILLIAM
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title VP
Name RAY, JOYCELYN M.
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title SECRETARY
Name LUDLOW, ALEXANDER
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title VP
Name IACOBELL, SHELLY L.
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title VP
Name OVERLAN, MATTHEW C.
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title VP
Name RINICELLA, RANDY D.
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000

Title VP
Name LUDLOW, ALEXANDER
Address 37 RADIO CIRCLE DRIVE
City-State-Zip: MOUNT KISCO NY 10549-5000