

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006090

FILED
Apr 03, 2018
Secretary of State
CC7553034904

Entity Name: STARMOUNT INSURANCE AGENCY, INC.

Current Principal Place of Business:

8485 GOODWOOD BLVD.
BATON ROUGE, LA 70806

Current Mailing Address:

1 FOUNTAIN SQUARE
CHATTANOOGA, TN 37402 US

FEI Number: 72-0809131

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DRIVE
SUITE A
TALLAHASSEE, FL 32301 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 CFO
Name WILD, JEFFREY G
Address 8485 GOODWOOD BLVD.
City-State-Zip: BATON ROUGE LA 70806

Title CEO
Name STERNBERG, ERICH
Address 8485 GOODWOOD BLVD.
City-State-Zip: BATON ROUGE LA 70806

Title EVP
Name ARNOLD, TIMOTHY G.
Address 1200 COLONIAL LIFE BOULEVARD
City-State-Zip: COLUMBIA SC 29210

Title EVP, CHEIF INFORMATION AND DIGITAL OFFICER
Name BHASIN, PUNEET
Address 1 FOUNTAIN SQUARE
City-State-Zip: CHATTANOOGA TN 37402

Title SVP, CORPORATE MARKETING AND PUBLIC RELATIONS
Name FOLEY, JOSEPH R.
Address 2211 CONGRESS STREET
City-State-Zip: PORTLAND ME 04122

Title EVP, GENERAL COUNSEL
Name IGLESIAS, LISA G.
Address 1 FOUNTAIN SQUARE
City-State-Zip: CHATTANOOGA TN 37402

Title VP, CORPORATE SECRETARY
Name JULLIENNE, PAUL J.
Address 1 FOUNTAIN SQUARE
City-State-Zip: CHATTANOOGA TN 37402

Title EVP, FINANCE
Name MCGARRY, JOHN F.
Address 2211 CONGRESS STREET
City-State-Zip: PORTLAND ME 04122

Continues on page 2

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: J. PAUL JULLIENNE

SECRETARY

04/03/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP, FINANCE
Name MITCHELL, STEPHEN J.
Address 2211 CONGRESS STREET
City-State-Zip: PORTLAND ME 04122

Title VP, TREASURER
Name SIIRA, TYLER W.
Address 1 FOUNTAIN SQUARE
City-State-Zip: CHATTANOOGA TN 37402

Title SVP, CHEIF ACCOUNTING OFFICER
Name WAXENBERG, DANIEL J.
Address 1 FOUNTAIN SQUARE
City-State-Zip: CHATTANOOGA TN 37402

Title SVP, TAX AND TREASURY
Name PASHLEY, CHERIE A.
Address 1 FOUNTAIN SQUARE
City-State-Zip: CHATTANOOGA TN 37402

Title CHAIRMAN, EVP
Name SIMONDS, MICHAEL Q.
Address 2211 CONGRESS STREET
City-State-Zip: PORTLAND ME 04122