## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F0400000590

#### Entity Name: THE GRAY CASUALTY & SURETY COMPANY

#### **Current Principal Place of Business:**

3601 N. I-10 SERVICE ROAD WEST METAIRIE, LA 70002

#### **Current Mailing Address:**

PO BOX 6202 METAIRIE, LA 70009-6202

## FEI Number: 72-1326720

#### Name and Address of Current Registered Agent:

COMMISSIONER OF INSURANCE 200 EAST GAINES STREET TALLAHASSEE, FL 32399-0300 US Certificate of Status Desired: No

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

## **Officer/Director Detail :**

	Title	VP, CHAIRMAN, DIRECTOR	Title	VPD
	Name	GRAY, MICHAEL T	Name	GRAY, WALTER V
	Address	3601 N. I-10 SERVICE ROAD WEST	Address	3601 N. I-10 SERVICE ROAD WEST
	City-State-Zip:	METAIRIE LA 70002	City-State-Zip:	METAIRIE LA 70002
	Title	VPD	Title	TD
	Name	GRAY, ERIC V	Name	HUGHES, ROBERT M
	Address	3601 N. I-10 SERVICE ROAD WEST	Address	3601 N. I-10 SERVICE ROAD WEST
	City-State-Zip:	METAIRIE LA 70002	City-State-Zip:	METAIRIE LA 70002
	Title	S	Title	PRESIDENT, DIRECTOR
	Name	MANGUNO, MARK S	Name	PISKE, CULLEN S
	Address	3601 N. I-10 SERVICE ROAD WEST	Address	3601 N I-10 SERVICE ROAD WEST
	City-State-Zip:	METAIRIE LA 70002	City-State-Zip:	METAIRIE LA 70002

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: ROBERT M. HUGHES

TREASURER

03/29/2018

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Mar 29, 2018 Secretary of State CC4232313956

Date