## 2022 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 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMISSIONER OF INSURANCE 200 EAST GAINES STREET TALLAHASSEE, FL 32399-0300 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 Mar 02, 2022

**Secretary of State** 

1709398213CC

Officer/Director Detail:

Title CFO Title PRESIDENT, DIRECTOR

Name JOHNSON, ROBERT P 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

Title SECRETARY Title S. VICE PRESIDENT

Name HENICAN, LEIGH ANNE Name SMITH, KENNETH P

Address PO BOX 6202 Address PO BOX 6202

City-State-Zip: METAIRIE LA 70009 City-State-Zip: METAIRIE LA 70009

Title VP Title SENIOR VICE PRESIDENT - CLAIMS

Name CHEW, CODY WIRT Name HENICAN, LEIGH ANNE

Address PO BOX 6202 Address PO BOX 6202

City-State-Zip: METAIRIE LA 70009 City-State-Zip: METAIRIE LA 70009

Title COO

Name PITRE, MICHAEL DAVID

Address PO BOX 6202

City-State-Zip: METAIRIE LA 70009

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 P. JOHNSON CFO 03/02/2022