2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003467

Entity Name: KEY RISK INSURANCE COMPANY

Current Principal Place of Business:

7823 NATIONAL SERVICE ROAD GREENSBORO. NC 27409

Current Mailing Address:

P.O. BOX 49129

GREENSBORO, NC 27419 US

FEI Number: 56-2060285 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 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

FILED Mar 03, 2021

Secretary of State

3820712351CC

Officer/Director Detail:

Title PRESIDENT Title ASST. TREASURER

Name BERKLEY, WILLIAN ROBERT JR Name BRAUD, BERTMAN A JR

Address 475 STEAMBOAT RD Address P.O. BOX 9190

City-State-Zip: GREENWICH CT 06830 City-State-Zip: DES MOINES IA 50306-9190

 Title
 ASST. TREASURER
 Title
 SECRETARY

 Name
 TINGELFF, SUSAN P
 Name
 WELT, PHILIP S

Address PO BOX 9190 Address 475 STEAMBOAT ROAD

City-State-Zip: DES MOINES IA 50306-9190 City-State-Zip: GREENWICH CT 06830

Title TREASURER

Name BAIO, RICHARD M

Address 475 STEAMBOAT ROAD

City-State-Zip: GREENWICH CT 06830

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: BERTMAN BRAUD

Electronic Signature of Signing Officer/Director Detail

ASSISTANT TREASURER

03/03/2021

Date