## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004447

Entity Name: C V STARR & CO CALIFORNIA

**Current Principal Place of Business:** 

100 MONTGOMERY STREET

24TH FLOOR

SAN FRANCISCO, CA 94014

**Current Mailing Address:** 

100 MONTGOMERY STREET 24TH FLOOR SAN FRANCISCO, CA 94014 US

FEI Number: 94-1115603 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM C/O 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

Officer/Director Detail:

Title ASSISTANT VICE PRESIDENT Title DIRECTOR

Name BLAINE, LYNN Name BLAKEY, STEVEN G.

Address 5151 SAN FELIPE STREET Address 3353 PEACHTREE ROAD N.E

SUITE 700 SUITE 1000

City-State-Zip: HOUSTON TX 77056 City-State-Zip: ATLANTA GA 30326

Title SECRETARY Title DIRECTOR, PRESIDENT AND CHIEF

Name BRYAN, THOMAS A

Address 200 PARK AVENUE

Address 200 PARK AVENUE

Address 399 PARK AVENUE 8TH FLOOR Address 399 PARK AVENUE

City-State-Zip: NEW YORK NY 10022

City-State-Zip: NEW YORK NY 10022

Title VP Title ASSISTANT SECRETARY

Name DOWD, JAMES

Address FLOOR, 9 Name MURRAY, JULIE

399 PARK AVENUE Address 399 PARK AVENUE 8TH FLOOR

City-State-Zip: NEW YORK NY 10022

City-State-Zip: NEW YORK NY 10022

Title VP

Name PITTINGER, JAMES Title DIRECTOR

Name SHAAK, RICHARD N.
Address 399 PARK AVENUE

Address FLOOR, 9
City-State-Zip: NEW YORK NY 10022 399 PARK AVENUE

City-State-Zip: NEW YORK NY 10022

**EXECUTIVE OFFICER** 

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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: JULIE MURRAY ASSISTANT SECRETARY 04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 16, 2014

**Secretary of State** 

CC7754610167

## Officer/Director Detail Continued:

Title TREASURER

Name TUCKER, WILLIAM

Address FLOOF

FLOOR, 8 399 PARK AVENUE

City-State-Zip: NEW YORK NY 10022