

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002502

Entity Name: PCH MUTUAL INSURANCE COMPANY, INC., A RISK
RETENTION GROUP**FILED**
Feb 06, 2019
Secretary of State
5739200152CC**Current Principal Place of Business:**58 EAST VIEW LANE
SUITE 2
BARRE, VT 05641**Current Mailing Address:**C/O RISK SERVICES
1605 MAIN STREET, SUITE 800
SARASOTA, FL 34236**FEI Number: 20-1065673****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ROGERS, MICHAEL T
1605 MAIN STREET, SUITE 800
SUITE 909E
SARASOTA, FL 34236 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** PRESIDENT
Name BORDO, JULIE M.
Address 2410 EWING AVENUE
City-State-Zip: EVANSTON IL 60201**Title** T, DIRECTOR
Name GOLLA, BERT
Address P.O. BOX TT371
City-State-Zip: SEATTLE WA 98155**Title** VP
Name GENTILE, NICHOLAS
Address 1010 EICHELBERGER ST SUITE 5
City-State-Zip: HANOVER PA 17331**Title** ASST. SECRETARY
Name MATTHEWS, TERESA M.
Address C/O RISK SERVICES, LLC
1605 MAIN STREET SUITE 800
City-State-Zip: SARASOTA FL 34236**Title** DIRECTOR
Name BRIAN, BARRICK
Address PO BOX 933
City-State-Zip: HANOVER PA 17331**Title** ASSISTANT TREASURER
Name WINCH, BRIAN T
Address C/O RISK SERVICES
1605 MAIN STREET, SUITE 800
City-State-Zip: SARASOTA FL 34236**Title** DIRECTOR
Name CHOMA, DEBORAH
Address C/O RISK SERVICES
1605 MAIN STREET, SUITE 800
City-State-Zip: SARASOTA FL 34236

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 BORDO**PRESIDENT****02/06/2019**

Electronic Signature of Signing Officer/Director Detail

Date