

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000183

Entity Name: PALMETTO SURETY CORPORATION**Current Principal Place of Business:**109 RIVER LANDING DRIVE,
SUITE 200
CHARLESTON, SC 29492**Current Mailing Address:**109 RIVER LANDING DRIVE,
SUITE 200
CHARLESTON, SC 29492 US**FEI Number:** 61-1426051**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E GAINES STREET
TALLAHASSEE, FL 32314-6200 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	C
Name	ASKEW, MARK
Address	109 RIVER LANDING DRIVE, SUITE 200
City-State-Zip:	CHARLESTON SC 29492

Title	D
Name	TODD, KELLY B
Address	109 RIVER LANDING DRIVE, SUITE 200
City-State-Zip:	CHARLESTON SC 29492

Title	D
Name	HOLDEN, BRIAN
Address	109 RIVER LANDING DRIVE, SUITE 200
City-State-Zip:	CHARLESTON SC 29492

Title	ST
Name	WILLIS, SCOTT
Address	109 RIVER LANDING DRIVE, SUITE 200
City-State-Zip:	CHARLESTON SC 29492

Title	DIRECTOR
Name	CLAXTON, SENA
Address	109 RIVER LANDING DRIVE, SUITE 200
City-State-Zip:	CHARLESTON SC 29492

Title	CFO
Name	HANDY, COLLEEN
Address	109 RIVER LANDING DRIVE, SUITE 200
City-State-Zip:	CHARLESTON SC 29492

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: COLLEEN HANDY

CFO

01/17/2019

Electronic Signature of Signing Officer/Director Detail_____
Date