

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 14, 2016
Secretary of State
CC1906817350

Entity Name: ASCENSION INSURANCE, INC.

Current Principal Place of Business:

5825 MEDLOCK BRIDGE PKWY SUITE 200
JOHNS CREEK, GA 30022

Current Mailing Address:

1277 TREAT BLVD. SUITE 400
WALNUT CREEK, CA 94597 US

FEI Number: 26-0291031

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

3H AGENT SERVICES, INC.
1415 PANTHER LN STE 327
NAPLES, FL 34109 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 S
Name PAGE, EDWARD NATHAN
Address 1277 TREAT BLVD
STE. 400
City-State-Zip: WALNUT CREEK CA 94597

Title T
Name PAGE, EDWARD NATHAN
Address 1277 TREAT BLVD
STE. 400
City-State-Zip: WALNUT CREEK CA 94597

Title PRESIDENT, DIRECTOR, CEO, ASST.
SECRETARY
Name TATUM, JOSEPH L. JR.
Address 1277 TREAT BLVD.
STE. 400
City-State-Zip: WALNUT CREEK CA 94597

Title EVP, CFO, COO
Name PAGE, EDWARD NATHAN
Address 1277 TREAT BLVD. SUITE 400
City-State-Zip: WALNUT CREEK CA 94597

Title VP
Name MARTIN, STEPHEN D.
Address 1277 TREAT BLVD. SUITE 400
City-State-Zip: WALNUT CREEK CA 94597

Title VP
Name VARNI, KERI A.
Address 1277 TREAT BLVD. SUITE 400
City-State-Zip: WALNUT CREEK CA 94597

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: EDWARD NATHAN PAGE

SECRETARY

04/14/2016

Electronic Signature of Signing Officer/Director Detail

Date