## 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002595

Entity Name: THE HEALTHCARE UNDERWRITING COMPANY, A RISK

RETENTION GROUP

**Current Principal Place of Business:** 

100 BANK STREET, SUITE 610 BURLINGTON, VT 05401

**Current Mailing Address:** 

100 BANK STREET, SUITE 610 BURLINGTON, VT 05401 US

FEI Number: 20-2837805 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 Jan 06, 2015

**Secretary of State** 

CC5832462103

Officer/Director Detail:

Title SECRETARY, DIRECTOR Title PRESIDENT AND TREASURER,

DIRECTOR

Name WATERFALL, MARCY
Name DEWITT, MICHAEL L

Address 100 BANK STREET, SUITE 610 Address 100 BANK STREET, SUITE 610

City-State-Zip: BURLINGTON VT 05401 City-State-Zip: BURLINGTON VT 05401

Title DIRECTOR

Name MURPHY, TYLER Title ASSISTANT TREASURER

Address 100 BANK STREET, SUITE 610 Name SNYDER, JAMES

Address 100 BANK STREET, SUITE 610

City-State-Zip: BURLINGTON VT 05401

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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: MICHAEL DEWITT PRESIDENT 01/06/2015