2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2019
Secretary of State
0368208442CC

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Entity Name: WESTGUARD INSURANCE COMPANY

Current Principal Place of Business:

16 S.RIVER STREET
WILKES-BARRE, PA 18702

Current Mailing Address:

16 S.RIVER STREET
P.O. BOX A-H
WILKES-BARRE, PA 18703-0020 US

FEI Number: 06-1678760

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

Officer/Director Detail :

Title	C
Name	SHELLEY, PETER
Address	100 STAMFORD PLACE
City-State-Zip:	STAMFORD CT 06902

Title	D
Name	O'SULLIVAN, CARMEL
Address	100 STAMFORD PLACE
City-State-Zip:	STAMFORD CT 06902

Title	SECRETARY
Name	DULIN, MICHAEL
Address	16 S.RIVER STREETWILKES BARRE, PA 18703
City-State-Zip:	WILKES-BARRE PA 18702

Title	D
Name	BYRNES, BRUCE
Address	100 FIRST STAMFORD PLACE STAMFO
City-State-Zip:	STAMFORD CT 06902

Title	P
Name	FOGUEL, SY
Address	16 S.RIVER STREETWILKES BARRE, PA 18703
City-State-Zip:	WILKES-BARRE PA 18702

Title	TREASURER
Name	AJCHENBAUM, EITAN
Address	16 S.RIVER STREET
City-State-Zip:	WILKES-BARRE PA 18702

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 J. DULIN SECRETARY 02/06/2019

Electronic Signature of Signing Officer/Director Detail — Date