

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005379

FILED
Jun 12, 2020
Secretary of State
8899524066CC

Entity Name: SPINNAKER INSURANCE COMPANY

Current Principal Place of Business:

233 SOUTH WACKER DRIVE, SUITE 5500
CHICAGO, IL 60606

Current Mailing Address:

1 PLUCKEMIN WAY
SUITE 102
BEDMINSTER TOWNSHIP, NJ 07921 US

FEI Number: 93-0928517

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 EAST 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 D
Name MASON, LAWRENCE
Address 233 SOUTH WACKER DRIVE, STE 5500
City-State-Zip: CHICAGO IL 60606

Title D
Name SCHACHT, JAMES
Address 12271 WISEMAN ST.
City-State-Zip: PETERSBURG IL 62675

Title P
Name INGREY, DAVID
Address 1 PLUCKEMIN WAY SUITE 102
City-State-Zip: BEDMINSTER TOWNSHIP NJ 07921

Title VP
Name TYBURSKI, ADAM
Address 1 PLUCKEMIN WAY SUITE 102
City-State-Zip: BEDMINSTER TOWNSHIP NJ 07921

Title T
Name WILLMOTT, JESSE
Address 1 PLUCKEMIN WAY
City-State-Zip: BEDMINSTER TOWNSHIP NJ 07921

Title D
Name YUNKER, DANIEL
Address 222 S. RIVERSIDE PLAZA, STE 1900
City-State-Zip: CHICAGO IL 60606

Title GENERAL COUNSEL
Name NICHOLAS, SCOTT
Address 1 PLUCKEMIN WAY
City-State-Zip: BEDMINSTER TOWNSHIP NJ 07921

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: JESSE WILLMOTT

CFO

06/12/2020

Electronic Signature of Signing Officer/Director Detail

Date