

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000005318

**Entity Name:** BAR VERMONT RISK RETENTION GROUP, INC.

**Current Principal Place of Business:**

76 SAINT PAUL ST, STE. 500  
BURLINGTON, VT 05401

**Current Mailing Address:**

76 SAINT PAUL ST, STE.500  
BURLINGTON, VT 05401 US

**FEI Number:** 03-0331337

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WILCOX, JANETTE  
13901 SUTTON PARK DR. S  
BLDG C, STE. 360  
JACKSONVILLE, FL 32224 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 T, D  
Name ARENA, THOMAS A  
Address 28 LIBERTY ST.  
City-State-Zip: NEW YORK NY 10005

Title VP, VC, DIRECTOR  
Name MCRAE, WILLIAM L  
Address ONE LIBERTY PLAZA  
City-State-Zip: NEW YORK NY 10006

Title VP, ASST. SECRETARY  
Name GRAY, NANCY L  
Address 76 SAINT PAUL ST, STE. 500  
City-State-Zip: BURLINGTON VT 05401

Title D  
Name EARNHARDT, J. WESLEY  
Address WORLDWIDE PLAZA  
825 8TH AVE.  
City-State-Zip: NEW YORK NY 10019

Title P, C, D  
Name PITTS, ANDREW J  
Address WORLDWIDE PLAZA  
825 EIGHTH AVENUE  
City-State-Zip: NEW YORK NY 10019-7475

Title VP, S  
Name JOHNSON, JEFFREY P  
Address 150 SOUTH CHAMPLAIN ST.  
City-State-Zip: BURLINGTON VT 05402

Title D  
Name BIRENBOIM, BRUCE  
Address 1285 AVENUE OF THE AMERICAS  
City-State-Zip: NEW YORK NY 10019

Title D  
Name LEDERKRAMER, DAVID M  
Address 11 TIMES SQUARE  
City-State-Zip: NEW YORK NY 10036

**Continues on page 2**

*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:** THOMAS ARENA

**TREASURER**

**04/03/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title D  
Name HAWKINS, HOWARD R JR.  
Address 200 LIBERTY ST.  
City-State-Zip: NEW YORK NY 10281

Title D  
Name WANG, GEORGE S  
Address 450 LEXINGTON AVE.  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name TAFT, WILLIAM H V  
Address 919 THID AVENUE  
City-State-Zip: NEW YORK NY 10022

Title D  
Name KREYNIN, LEONARD  
Address 450 LEXINGTON AVE.  
City-State-Zip: NEW YORK NY 10017

Title D  
Name GROSKAUFMANIS, KARL  
Address ONE NEW YORK PLAZA  
City-State-Zip: NEW YORK NY 10004

Title DIRECTOR  
Name MINCEMOYER, R. JAKE  
Address 1221 AVENUE OF THE AMERICAS  
City-State-Zip: NEW YORK NY 10020-1095