

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000000510

**Entity Name:** WESTERN WORLD INSURANCE COMPANY**Current Principal Place of Business:**300 KIMBALL DRIVE, SUITE 500  
PARSIPPANY, NJ 07054**Current Mailing Address:**300 KIMBALL DRIVE, SUITE 500  
PARSIPPANY, NJ 07054 US**FEI Number:** 02-0266622**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            PRESIDENT  
Name            SANTORA, TROY  
Address        4 WORLD TRADE CENTER  
                  150 GREENWICH ST 47TH FL  
City-State-Zip: NEW YORK NY 10007

Title            SVP  
Name            ROSA, LISA A  
Address        300 KIMBALL DRIVE, SUITE 500  
City-State-Zip: PARSIPPANY NJ 07054

Title            SVP  
Name            ROBERT, EELLS  
Address        300 KIMBALL DRIVE, SUITE 500  
City-State-Zip: PARSIPPANY NJ 07054

Title            SVP/CFO  
Name            AYASH, GERALD  
Address        300 KIMBALL DRIVE, SUITE 500  
City-State-Zip: PARSIPPANY NJ 07054

Title            CHAIRMAN  
Name            MCELROY, DAVID  
Address        300 KIMBALL DRIVE, SUITE 500  
City-State-Zip: PARSIPPANY NJ 07054

*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:** LISA ROSA**SECRETARY****04/25/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date