

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000000712

**FILED**  
**Apr 07, 2018**  
**Secretary of State**  
**CC7169222531**

**Entity Name:** STARR SURPLUS LINES INSURANCE COMPANY

**Current Principal Place of Business:**

FLOOR 31,500 WEST MONROE STREET  
CHICAGO, IL 60661

**Current Mailing Address:**

399 PARK AVENUE, 8TH FLOOR  
NEW YORK, NY 10022 US

**FEI Number:** 26-3622499

**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 VP  
Name BAKER, DAVID HATCHER  
Address 399 PARK AVENUE, 8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title CHIEF UNDERWRITING  
OFFICER/SENIOR VICE PRESIDENT  
Name BESSINGER, RICHARD ALEXANDER  
Address 399 PARK AVENUE, 8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR/PRESIDENT AND CHIEF  
EXECUTIVE OFFICER  
Name BLAKEY, STEVEN G.  
Address 399 PARK AVENUE, 2ND FLOOR  
City-State-Zip: NEW YORK NY 10022

Title ASSISTANT VICE PRESIDENT  
Name CAPITANO, CARMELLA  
Address 350 W. 55TH STREET,APT 90  
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR  
Name CASTELLI, MICHAEL J.  
Address FLOOR, 8,399 PARK AVENUE  
City-State-Zip: NEW YORK NY 10022

Title ASSISTANT CONTROLLER  
Name CHEN, YONG  
Address 399 PARK AVENUE, 8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title REINSURANCE OFFICER  
Name CONSTABLE, JEFFREY  
Address FLOOR 31,500 WEST MONROE  
STREET  
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR OF ACTUARIAL SERVICES  
Name DUFFY, JOHN  
Address 399 PARK AVENUE  
City-State-Zip: NEW YORK NY 10022

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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:** JULIE MURRAY

**ASSISTANT SECRETARY** 04/07/2018

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title CHIEF PROPERTY/CASUALTY CLAIMS OFFICER  
Name FITZGERALD, DAVID  
Address FLOOR 31,500 WEST MONROE STREET  
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR/GENERAL COUNSEL AND  
SECRETARY  
Name GINSBURG, NEHEMIAH  
Address 399 PARK AVENUE, 8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR  
Name LUNDQVIST, BERTIL P.  
Address 399 PARK AVENUE, 17TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title SENIOR VICE PRESIDENT  
Name NORFLEET, DAVID  
Address ONE INTERNATIONAL PLACE, 13TH FLOOR  
City-State-Zip: BOSTON MA 02110

Title DIRECTOR  
Name SMITH, HOWARD IAN  
Address 399 PARK AVENUE, 17TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title CHIEF FINANCIAL OFFICER/TREASURER  
Name TUCKER, WILLIAM  
Address FLOOR, 8,399 PARK AVENUE  
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR  
Name FREUDMANN, AXEL  
Address FLOOR 31,500 WEST MONROE  
STREET  
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR  
Name JOHNSON, JOSEPH CHARLES HENRY  
Address FLOOR, 5,19 PAR-LA-VILLE ROAD  
HAMILTON HM11 BERMUDA  
City-State-Zip: HAMILTON HM11 BERMUDA

Title ASSISTANT SECRETARY  
Name MURRAY, JULIE  
Address 399 PARK AVENUE, 8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR OF TAXATION  
Name O'CONNOR, WILLIAM  
Address FLOOR, 8,399 PARK AVENUE  
City-State-Zip: NEW YORK NY 10022

Title VICE PRESIDENT AND CHIEF  
INFORMATION OFFICER  
Name TORAN, MICHAEL T.  
Address 399 PARK AVENUE, 9TH FLOOR  
City-State-Zip: NEW YORK NY 10022