

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000000712

Entity Name: STARR SURPLUS LINES INSURANCE COMPANY

Current Principal Place of Business:

399 PARK AVENUE, SUITE 2000
NEW YORK, NY 10022

Current Mailing Address:

399 PARK AVENUE, SUITE 2000
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 DIRECTOR
Name JOHNSON, JOSEPH CHARLES HENRY
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name LUNDQVIST, BERTIL P.
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title TREASURER
Name TUCKER, WILLIAM
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title CFO
Name TUCKER, WILLIAM
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title ASSISTANT SECRETARY
Name MURRAY, JULIE
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title CONTROLLER
Name CHEN, YONG
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title CHIEF UNDERWRITING OFFICER
Name CONWAY, DANIEL
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title CHIEF PROPERTY/CASUALTY CLAIMS OFFICER
Name FITZGERALD, DAVID
Address 399 PARK AVENUE, SUITE 2000
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 05/27/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SMITH, HOWARD IAN
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name FREUDMANN, AXEL
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name BLAKEY, STEVEN G.
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR OF ACTUARIAL SERVICES
Name DUFFY, JOHN
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title GENERAL COUNSEL AND SECRETARY
Name GINSBURG, NEHEMIAH
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title ASSISTANT VICE PRESIDENT
Name CAPITANO, CARMELLA
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name CASTELLI, MICHAEL J.
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name GINSBURG, NEHEMIAH
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title PRESIDENT AND CHIEF EXECUTIVE OFFICER
Name BLAKEY, STEVEN G.
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title SENIOR VICE PRESIDENT
Name NORFLEET, DAVID
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title REINSURANCE OFFICER
Name CONSTABLE, JEFFREY
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title SENIOR VICE PRESIDENT
Name BESSINGER, RICHARD ALEXANDER
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR OF TAXATION
Name O'CONNOR, WILLIAM
Address 399 PARK AVENUE, SUITE 2000
City-State-Zip: NEW YORK NY 10022