2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000003194

Entity Name: EVEREST PREMIER INSURANCE COMPANY

Current Principal Place of Business:

477 MARTINSVILLE ROAD

LIBERTY CORNER, NJ 07938-0830

Current Mailing Address:

PO BOX 830

LIBERTY CORNER, NJ 07938-0830 US

FEI Number: 81-2926232 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER PO BOX 6200 (32314-6200) 200 E GAINES ST TALLAHASSEE, FL 32339 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:

Address

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title EVP Title DIRECTOR, EVP, CFO, TREASURER

Name CAMERINO, JAMES Name HOWIE, CRAIG

Address 477 MARTINSVILLE ROAD Address 477 MARTINSVILLE ROAD

City-State-Zip: LIBERTY CORNER NJ 07938-0830 City-State-Zip: LIBERTY CORNER NJ 07938-0830

Title DIRECTOR, EVP, SECRETARY, Title DIRECTOR, CHIEF UNDERWRITING

GENERAL COUNSEL, COMPLIANCE OFFICER, SVP

OFFICER Name MULRAY, MICHAEL

Name MUKHERJEE, SANJOY Address 477 MARTINSVILLE ROAD

Address 477 MARTINSVILLE ROAD City-State-Zip: LIBERTY CORNER NJ 07938-0830

City-State-Zip: LIBERTY CORNER NJ 07938-0830

Title SVP
Title DIRECTOR, PRESIDENT Name DRI

Name ZAFFINO JONATHAN

Name ZAFFINO, JONATHAN Address 477 MARTINSVILLE ROAD

Address 477 MARTINSVILLE ROAD City-State-Zip: LIBERTY CORNER NJ 07938-0830

City-State-Zip: LIBERTY CORNER NJ 07938-0830

477 MARTINSVILLE ROAD

Title SVP

Title SVP Name KARMILOWICZ, MICHAEL

Name GERMANO, CONNIE Address 461 5TH AVENUE

5TH FLOOR

City-State-Zip: LIBERTY CORNER NJ 07938-0830 City-State-Zip: NEW YORK NY 10017-6234

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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: SANJOY MUKHERJEE EVP, SECRETARY 04/25/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 25, 2018

Secretary of State

CC9993037267

Officer/Director Detail Continued:

SVP Title Title SVP

Name MONTEAGUDO, LUIS Name MORELLI, THOMAS

Address 477 MARTINSVILLE ROAD Address 477 MARTINSVILLE ROAD PO BOX 830

PO BOX 830

LIBERTY CORNER NJ 07938-0830 LIBERTY CORNER NJ 07938-0830 City-State-Zip: City-State-Zip:

SVP Title SVP Title

NIKODEM, ERIK Name Name SANDLER, DAVID

Address 477 MARTINSVILLE ROAD Address 461 5TH AVENUE 5TH FLOOR PO BOX 830

NEW YORK NY 10017-6234 City-State-Zip: LIBERTY CORNER NJ 07938-0830 City-State-Zip:

Title VP, ACTUARY Title VP, COMPTROLLER

EDMONDS, ELLEN Name SHOEMAKER, KEITH Name

Address 477 MARTINSVILLE ROAD Address 477 MARTINSVILLE ROAD

PO BOX 830 PO BOX 830

City-State-Zip: LIBERTY CORNER NJ 07938-0830 City-State-Zip: LIBERTY CORNER NJ 07938-0830