

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000003391

Entity Name: WESTMONT INSURANCE SERVICES, INC.**Current Principal Place of Business:**1763 MARLTON PIKE EAST, SUITE 200
CHERRY HILL, NJ 08003**Current Mailing Address:**1763 MARLTON PIKE EAST, SUITE 200
CHERRY HILL, NJ 08003 US**FEI Number:** 22-3830032**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN ST. SUITE 4
TALLAHASSEE, FL 32301 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 OWNER/ PRESIDENT/
CEO/DIRECTOR/CFO

Name MARRO, FRED

Address 1763 MARLTON PIKE EAST
SUITE 200

City-State-Zip: CHERRY HILL NJ 08003

Title SECRETARY

Name BIRCHLER, LIANE

Address 1763 MARLTON PIKE EAST
SUITE 200

City-State-Zip: CHERRY HILL NJ 08003

Title ASST. VICE PRESIDENT

Name BURKE, REBECCA

Address 1763 MARLTON PIKE EAST
SUITE 200

City-State-Zip: CHERRY HILL NJ 08003

Title VP

Name STEPANSKI, NANCY

Address 1763 MARLTON PIKE EAST
SUITE 200

City-State-Zip: CHERRY HILL NJ 08003

Title VP

Name MARRO, LOGAN

Address 1763 MARLTON PIKE EAST
SUITE 200

City-State-Zip: CHERRY HILL NJ 08003

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: FRED MARROOWNER/ PRESIDENT/
CEO/DIRECTOR/CFO

04/16/2024

Electronic Signature of Signing Officer/Director Detail_____
Date