

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000002059

**FILED**  
**Feb 04, 2021**  
**Secretary of State**  
**4338084237CC**

**Entity Name:** LIGHTHOUSE PROPERTY INSURANCE CORPORATION

**Current Principal Place of Business:**

4224 HENDERSON BLVD.  
TAMPA, FL 33629

**Current Mailing Address:**

4224 HENDERSON BLVD.  
TAMPA, FL 33629 US

**FEI Number: 26-3013152**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER- STATE OF FLORIDA  
DEPARTMENT OF FINANCIAL SERVICES  
200 E. GAINES STREET  
TALLAHASSEE, FL 32399 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            DIR/CEO  
Name            WHITE, PATRICK  
Address        4224 HENDERSON BLVD.  
City-State-Zip: TAMPA FL 33629

Title            DIR/TREA  
Name            MOORE, SCOT  
Address        4224 HENDERSON BLVD.  
City-State-Zip: TAMPA FL 33629

Title            CHIEF RISK OFF.  
Name            GOBBLE, ERIC  
Address        4224 HENDERSON BLVD.  
City-State-Zip: TAMPA FL 33629

Title            DIRECTOR  
Name            BUTLER, ROBERT  
Address        4224 HENDERSON BLVD.  
City-State-Zip: TAMPA FL 33629

Title            DIR  
Name            HUGHES JR., JAMES  
Address        4224 HENDERSON BLVD.  
City-State-Zip: TAMPA FL 33629

Title            DIR  
Name            WEISNER, KENT  
Address        4224 HENDERSON BLVD.  
City-State-Zip: TAMPA FL 33629

*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: SCOT MOORE**

**DIRECTOR**

**02/04/2021**

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

\_\_\_\_\_  
Date