2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000002101

Entity Name: DIGITAL EDGE INSURANCE COMPANY

Current Principal Place of Business:

76 ST PAUL ST STE 500 BURLINGTON, VT 05401

Current Mailing Address:

76 ST PAUL ST STE 500 BURLINGTON, VT 05401

FEI Number: 82-4117108

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E GAINES ST TALLAHASSEE, FL 32339 US

Certificate of Status Desired: No

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

Officer/Director Detail :

••			
Title	VP	Title	VP
Name	VAN EMBURGH, MARK	Name	JOY, PETER
Address	76 ST PAUL ST STE 500	Address	76 ST PAUL ST STE 500
City-State-Zip:	BURLINGTON VT 05401	City-State-Zip:	BURLINGTON VT 05401
Title Name Address City-State-Zip:	SENIOR VICE PRESIDENT & CHIEF FINANCIAL OFFICER HORBELT, OLIVER 76 ST PAUL ST STE 500 BURLINGTON VT 05401	Title Name Address City-State-Zip:	PRESIDENT, CEO, DIRECTOR KERNER, MICHAEL 76 ST PAUL ST STE 500 BURLINGTON VT 05401
Title Name	ASSISTANT GENERAL COUNSEL, SECRETARY GREEN, DAVID	Title Name Address	ASSISTANT SECRETARY RIVERA, IGNACIO 76 ST PAUL ST STE 500
Address	76 ST PAUL ST STE 500	City-State-Zip:	BURLINGTON VT 05401
City-State-Zip:	BURLINGTON VT 05401	Title	DIRECTOR
Title	VP	Name	KLEINER, ANDREAS
Name	KRAMER, ELIZABETH	Address	76 ST PAUL ST STE 500
Address	76 ST PAUL ST STE 500	City-State-Zip:	BURLINGTON VT 05401
City-State-Zip:	BURLINGTON VT 05401	Continues of	on page 2

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: PETER JOY

VICE PRESIDENT

04/08/2022

Electronic Signature of Signing Officer/Director Detail

FILED Apr 08, 2022 Secretary of State 5667685429CC

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	KUHN, KENNETH
Address	76 ST PAUL ST STE 500
City-State-Zip:	BURLINGTON VT 05401