

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000006750

Entity Name: MASTHEAD INSURANCE AGENCY INC.

Current Principal Place of Business:

101 WEST 6TH STREET, 5TH FLOOR
AUSTIN, TX 78701

Current Mailing Address:

101 WEST 6TH STREET, 5TH FLOOR
AUSTIN, TX 78701 US

FEI Number: 87-1047417

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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, PRESIDENT
Name MCCATHRON, RICHARD
Address 150 FOREST AVENUE
City-State-Zip: PALO ALTO CA 94301

Title TREASURER, DIRECTOR
Name ELLIS, STEWART
Address 150 FOREST AVENUE
City-State-Zip: PALO ALTO CA 94301

Title SECRETARY, DIRECTOR
Name BOWDEN, TRACY
Address 150 FOREST AVENUE
City-State-Zip: PALO ALTO CA 94301

Title ASST. SECRETARY
Name SELF, NANCY
Address 150 FOREST AVENUE
City-State-Zip: PALO ALTO CA 94301

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: NANCY SELF

ASSISTANT SECRETARY 04/24/2023

Electronic Signature of Signing Officer/Director Detail

Date