2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005405

Entity Name: AMERICAN CONTRACTORS INDEMNITY COMPANY

FILED
Jun 28, 2016
Secretary of State
CC2500671942

Current Principal Place of Business:

601 SOUTH FIGUEROA STREET

SUITE 1600

LOS ANGELES, CA 900175721

Current Mailing Address:

601 SOUTH FIGUEROA STREET

SUITE 1600

LOS ANGELES, CA 900175721 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST.

ATTN: SERVICE OF PROCESS SECTION TALLAHASSEE, FL 32399-4201 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

Officer/Director Detail:

Title PRESIDENT, CEO, DIRECTOR Title DIRECTOR

Name PESSIN, ADAM S. Name IRICK, BRAD T.

Address 601 SOUTH FIGUEROA STREET Address 601 SOUTH FIGUEROA STREET

SUITE 1600 SUITE 1600

City-State-Zip: LOS ANGELES CA 900175721 City-State-Zip: LOS ANGELES CA 900175721

Title ASST. SECRETARY, ASST. VP Title TREASURER, VP
Name LEE, JEANNIE J. Name LEE, JONATHAN

Address 601 SOUTH FIGUEROA STREET Address 601 SOUTH FIGUEROA STREET

SUITE 1600 SUITE 1600

City-State-Zip: LOS ANGELES CA 900175721 City-State-Zip: LOS ANGELES CA 900175721

Title DIRECTOR, ASST. SECRETARY Title SECRETARY

Name RINICELLA, RANDY D. Name LUDLOW, ALEXANDER

Address 601 SOUTH FIGUEROA STREET Address 601 SOUTH FIGUEROA STREET

SUITE 1600 SUITE 1600

City-State-Zip: LOS ANGELES CA 900175721 City-State-Zip: LOS ANGELES CA 900175721

Title DIRECTOR

Name CARMAN, PETER W.

Address 601 SOUTH FIGUEROA STREET

SUITE 1600

City-State-Zip: LOS ANGELES CA 900175721

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: ALEXANDER LUDLOW SECRETARY 06/28/2016

Date