

2016 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

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FILED
Aug 09, 2016
Secretary of State
CC9611311248

Entity Name: EXPLORER INSURANCE COMPANY

Current Principal Place of Business:

15025 INNOVATION DRIVE
SAN DIEGO, CA 92128-3409

Current Mailing Address:

15025 INNOVATION DRIVE
SAN DIEGO, CA 92128-3409 US

FEI Number: 94-2784519

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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 D
Name FELDMAN, BERNARD M
Address 11455 EL CAMINO REAL
City-State-Zip: SAN DIEGO CA 92130-2045

Title CHAIRMAN
Name RADY, ERNEST S
Address 11455 EL CAMINO REAL
City-State-Zip: SAN DIEGO CA 92130-2045

Title SECRETARY, DIRECTOR
Name LEON, TERESA RT
Address 15025 INNOVATION DRIVE
City-State-Zip: SAN DIEGO CA 92128-3409

Title CFO, DIRECTOR
Name ROSTAMIAN, FARIBORZ (FRED)
Address 15025 INNOVATION DRIVE
City-State-Zip: SAN DIEGO CA 92128-3409

Title P, DIRECTOR
Name PRIOR, KEVIN M
Address 15025 INNOVATION DRIVE
City-State-Zip: SAN DIEGO CA 92128-3409

Title SVP
Name HOPPEN, DAVID G
Address 15025 INNOVATION DRIVE
City-State-Zip: SAN DIEGO CA 92128-3409

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: TERESA RT LEON

SECRETARY

08/09/2016

Electronic Signature of Signing Officer/Director Detail

Date