

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 805810

FILED  
Apr 21, 2010  
Secretary of State

Entity Name: MAX AMERICA INSURANCE COMPANY

**Current Principal Place of Business:**

9020 STONY POINT PARKWAY  
SUITE 325  
RICHMOND, VA 23235 US

**New Principal Place of Business:**

**Current Mailing Address:**

9020 STONY POINT PARKWAY  
SUITE 325  
RICHMOND, VA 23235 US

**New Mailing Address:**

FEI Number: 35-0293730      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: VACCARO, JR, STEPHEN J  
Address: 9020 STONY POINT PARKWAY, STE 325  
City-St-Zip: RICHMOND, VA 23235 US

Title: CFO  
Name: LODERICK, STEPHEN M  
Address: 9020 STONY POINT PARKWAY, STE 325  
City-St-Zip: RICHMOND, VA 23235 US

Title: EVP  
Name: SANDERS, BRYAN W  
Address: 9020 STONY POINT PARKWAY, STE 325  
City-St-Zip: RICHMOND, VA 23235 US

Title: SVP  
Name: MILLER, MICHAEL  
Address: 55 BROADWAY  
City-St-Zip: NEW YORK, NY 10004 US

Title: BOD  
Name: FREIJIE, JR, RICHARD T  
Address: 300 N MERIDIAN ST, STE 2700  
City-St-Zip: INDIANAPOLIS, IN 46204 US

Title: BOD  
Name: MINTON, PETER  
Address: 2 FRONT ST, MAX HOUSE  
City-St-Zip: HAMILTON, HM 11 BM

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: STEPHEN M LODERICK

CFO

04/21/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date