

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 29, 2011
Secretary of State

Entity Name: ACORD GLOBAL INSURANCE STANDARDS CORPORATION

Current Principal Place of Business:

2 BLUE HILL PLAZA, 3RD FL
PEARL RIVER, NY 10965

New Principal Place of Business:

Current Mailing Address:

2 BLUE HILL PLAZA
PO BOX 1529
PEARL RIVER, NY 10965

New Mailing Address:

FEI Number: 13-2940919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: PD
Name: MACIAG, GREGORY A
Address: 2 BLUE HILL PLAZA
City-St-Zip: PEARL RIVER, NY 10965

Title: VS
Name: BEL, GARY L
Address: 2 BLUE HILL PLAZA
City-St-Zip: PEARL RIVER, NY 10965

Title: D
Name: LEONARD, JOHN
Address: 2 BLUE HILL PLAZA
City-St-Zip: PEARL RIVER, NY 10965

Title: V
Name: KROCHTA, TANYA
Address: 2 BLUE HILL PLAZA
City-St-Zip: PEARL RIVER, NY 10965

Title: V
Name: LAKER, ROY
Address: 2 BLUE HILL PLAZA
City-St-Zip: PEARL RIVER, NY 1965

Title: V
Name: CHUMBLEY, LLOYD A
Address: 2 BLUE HILL PLAZA
City-St-Zip: PEARL RIVER, NY 10965

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TANYA KROCHTA

CAO

04/29/2011

Electronic Signature of Signing Officer or Director

Date