2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # P05178** Jan 21, 2000 8:00 am 1. Entity Name **Secretary of State** HARBOURTON REASSURANCE, INC. 01-21-2000 90091 011 ***150.00 Mailing Address Principal Place of Business 3025 S PARKER RD 2530 S PARKER RD STE 109 STE 109 AURORA CO 80014 AURORA CO 80014-2914 US 2. Principal Place of Business 3. Mailing Address 1200 Seventeenth Streets: 1200 Seventeenth Street Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite #1000 Suite #1000 Applied For City & State City & State 4. FEI Number 23-2038295 Denver CO 30.01 Denver CO 3010. Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 80202 80202 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CEO. President & Director ☐ Change TITLE K Delete TITLE NAME SCHMIT, HERMAN H. NAME Michael C. French STREET ADDRESS STREET ADDRESS 1200 Seventeenth St., Ste #1000 3025 S PARK RD STE 109 CITY-ST-ZIP CITY-ST-ZIP AURORA CO 80014 Denver CO 80202 TITLE ☐ Addition ☐ Delete TITLE WYLDE BONNIE C NAME NAME 1200 Seventeenth Street STREET ADDRESS STREET ADDRESS 3025 S PARKER RD STE 109 Denver CO 80202 CITY-ST-7IP CITY-ST-ZIP AURORA CO 80014 ☐ Change Addition Delete TITLE DITLE SVP, CFO & Director NAME MILLS, DAVID W:--NAME Peter W. Presperin STREET ADDRESS STREET ADDRESS 3025S PARKER RD STE 109 1200 Seventeenth St., Ste #1000 CITY-ST-78 CITY-ST-ZIP AURORA CO 80014 Denver CO 80202 SVP, Chief Operating Officer Diamect ErAddition Delete TITLE TITLE Henryk "Hank" Sulikowski CAREY, JAMES J. NAME NAME STREET ADDRESS 1200 Seventeenth St., Ste #1000 3025 S PARKER RD STE 109 STREET ADDRESS CITY-ST-ZIP AURORA CO 80014 CITY-ST-ZIP Denver CO 80202 Addition ☐ Change ☐ Delete TITLE VP, Chief Actuary NAME NAME Bruce Crozier STREET ADDRESS STREET ADDRESS 1200 Seventeenth St., Ste #1000 CITY-ST-ZIP CITY-ST-ZiP Denver CO 80202 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE: Signature and typed on printed bysic of signing officer on Director Dayline Pho

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