

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000083320

FILED  
Apr 11, 2012  
Secretary of State

Entity Name: PURE INSURANCE COMPANY

**Current Principal Place of Business:**

800 CORPORATE DRIVE SUITE 420  
FT LAUDERDALE, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

ONE NORTH LEXINGTON AVENUE  
1450  
WHITE PLAINS, NY 10601

**New Mailing Address:**

44 SOUTH BROADWAY  
301  
WHITE PLAINS, NY 10601

FEI Number: 26-3109178

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHIEF FINANCIAL OFFICER  
200 E GAINES ST  
TALLAHASSEE, FL 32399 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: D  
Name: CAREY, JAMES  
Address: 9 NORMANDY LANE  
City-St-Zip: RIVERSIDE, CT 06878

Title: D  
Name: MUNDHEIM, PETER  
Address: 165 E 72ND STREET APT 4E  
City-St-Zip: NEW YORK, NY 10021

Title: D  
Name: ZERBIB, NICHOLAS  
Address: 10 SOUTH DRIVE  
City-St-Zip: LARCHMONT, NY 10538

Title: D  
Name: BUCHMUELLER, ROSS  
Address: 62 CARLEON LANE  
City-St-Zip: LARCHMONT, NY 10538

Title: D  
Name: BAINE, J. STEPHEN  
Address: 10815 CHARLETON DRIVE  
City-St-Zip: VERO BEACH, FL 32693

Title: D  
Name: LAPAUL, DAVID  
Address: 300 WEST SPRING ST #603  
City-St-Zip: COLUMBUS, OH 43215

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: PHIL FIGUEIREDO

SVP

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date