

2007- FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90836 012 ***150.00

DOCUMENT # P26864	
1. Entity Name SEABRIGHT INSURANCE COMPANY	

Principal Place of Business 2101 4TH AVE 1600 SEATTLE, WA 98121 US	Mailing Address 2101 4TH AVE 1600 SEATTLE, WA 98121 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

10000000



04182007 Chg-P CR2E034 (12/06)

4. FEI Number 43-1436329		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PASQUALETTO, JOHN G 2101 4TH AVE SEATTLE, WA 98121 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Wax, Debra R. 2101 4th Ave Suite 1600 Seattle WA 98121 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GERGASKO, RICH 2101 4TH AVE SEATTLE, WA 98121 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Edwards, Joseph A. 2101 4th Ave Suite 1600 Seattle WA 98121 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DE VITA, JOE 2101 4TH AVE SEATTLE, WA 98121 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Josephson, Mural R. 2101 4th Ave Suite 1600 Seattle WA 98121 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHUNG, PETER Y 2101 4TH AVE SEATTLE, WA 98121 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Morris, George M. 2101 4th Ave Suite 1600 Seattle WA 98121 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARTER, J. SCOTT 2101 4TH AVE SEATTLE, WA 98121 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Phil Romney **PHIL ROMNEY**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/07
Date

206-269-8500
Daytime Phone #