

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90972 050 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P34863

1. Entity Name GERLING AMERICA INSURANCE COMPANY

DO NOT WRITE IN THIS SPACE

80057531

2. Principal Place of Business
717 Fifth Avenue

Suite, Apt. #, etc.
14th Floor

City & State
New York, NY

Zip
10022

Country
USA

3. Mailing Address
717 Fifth Avenue

Suite, Apt. #, etc.
14th Floor

City & State
New York, NY

Zip
10022

Country
USA

4. FEI Number
13-3071466

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Treasurer & Insurance Commissioner

Street Address (P.O. Box Number is Not Acceptable)
c/o Insurance Department

Plaza Level II The Capitol

City Tallahassee FL Zip Code 32399

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE Director
NAME Zech, Juergen
STREET ADDRESS Donauweg 7D 50858 Cologne Germany
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director/Vice President
NAME LaRocca, Michael P.
STREET ADDRESS 717 Fifth Avenue
CITY-ST-ZIP New York, NY 10022

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V/T/D
NAME Barrow, Richard M.
STREET ADDRESS 951 Jerome Street
CITY-ST-ZIP Baldwin, NY

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME Martin, John
STREET ADDRESS 717 Fifth Ave, NY NY 10022
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P/D
NAME Noack, Peter
STREET ADDRESS 717 Fifth Avenue
CITY-ST-ZIP New York, NY 10022

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V/D
NAME Davidowitz, Mark
STREET ADDRESS 717 Fifth Avenue NY NY 10022
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph L. Pulivert 3/15/02 212-756-2662

Date

Daytime Phone #

CR2ED34B (12/01)

Attachment
ID# P34863
80057531

NAME AND ADDRESS OF EACH DIRECTOR AND KEY
OFFICER OF THE GERLING AMERICA INSURANCE COMPANY
AS OF 12/31/01

TITLE: C/D
NAME: Jansli, Björn
STREET ADDRESS: Gereonshof
CITY - ST - ZIP: 5000 Cologne 1, Germany

TITLE: D
NAME: Henke, Andreas H.
STREET ADDRESS: 480 University Avenue
CITY - ST - ZIP: Toronto, Ontario M5G 1V6 Canada

TITLE: D
NAME: Jörissen, Dr. Hermann
STREET ADDRESS: Gereonshof
CITY - ST - ZIP: 5000 Cologne 1, Germany

TITLE: V/S/D
NAME: Pulvirenti, Joseph L.
STREET ADDRESS: 717 Fifth Avenue
CITY - ST - ZIP: New York, NY 10022

TITLE: D
NAME: Huebel, David F.
STREET ADDRESS: 480 University Avenue
CITY - ST - ZIP: Toronto, Ontario M5G 1V6 Canada

TITLE: V/D
NAME: Crotser, Larry A.
STREET ADDRESS: 717 Fifth Avenue
CITY - ST - ZIP: New York, NY 10022

TITLE: D
NAME: Silverman, Israel A.
STREET ADDRESS: 717 Fifth Avenue
CITY - ST - ZIP: New York, NY 10022

TITLE: D
NAME: Thompson, John J.
STREET ADDRESS: 550 South Hope Street, Ste. 1850
CITY - ST - ZIP: Los Angeles, CA 90071