2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L62500

Entity Name: PARKS INSURANCE CORPORATION

FILED
Mar 28, 2019
Secretary of State
2407311352CC

Current Principal Place of Business:

1 STATE STREET PLAZA, 9TH FLOOR
NEW YORK, NY 10004

Current Mailing Address:

3000 EXECUTIVE PKWY STE 325
SAN RAMON, CA 94583 US

FEI Number: 59-3003963

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: KANETHA BISHOP 03/28/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	TREASURER
Name	KUNNEY, MARC	Name	CHAN, KARMAN MA
Address	ONE CALIFORNIA STREET, SUITE 400	Address	425 CALIFORNIA STREET STREET, 24TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94111	City-State-Zip:	SAN FRANCISCO CA 94104
Title	SECRETARY	Title	DIRECTOR
Name	CRAWFORD, DANIEL J.	Name	HAHN, JOHN
Address	2000 ALAMEDA DE LAS PULGAS, SUITE 280	Address	425 CALIFORNIA STREET STREET, 24TH FLOOR
City-State-Zip:	SAN MATEO CA 94403	City-State-Zip:	SAN FRANCICO CA 94104
Title	DIRECTOR	Title	DIRECTOR
Name	GARVEY, PETER	Name	PUCINELLI, STEVEN
Address	425 CALIFORNIA STREET STREET, 24TH FLOOR	Address	65 EAST 55TH STREET, 32ND FLOOR
City-State-Zip:	SAN FRANCISCO CA 94104	City-State-Zip:	NEW YORK NY 10022

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: KARMAN MA CHAN TREASURER 03/28/2019

Electronic Signature of Signing Officer/Director Detail — Date