2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L62500

Entity Name: PARKS INSURANCE CORPORATION

Current Principal Place of Business:

1 CALIFORNIA STREET

SUITE 400

SAN FRANCISCO, CA 94111

Current Mailing Address:

1 CALIFORNIA STREET

SUITE 400

SAN FRANCISCO, CA 94111 US

FEI Number: 59-3003963 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent

Date

FILED Apr 30, 2024

Secretary of State

6216549655CC

Officer/Director Detail:

PRESIDENT Title Title DIRECTOR

KUNNEY, MARC Name Name CHAN, KARMAN

Address 1 CALIFORNIA STREET Address 1 CALIFORNIA STREET SUITE 400

SUITE 400

SAN FRANCISCO CA 94111 SAN FRANCISCO CA 94111 City-State-Zip: City-State-Zip:

Title SECRETARY, DIRECTOR Title **TREASURER**

CRAWFORD, DANIEL J. MAMMARO, FRANK Name Name

2000 ALAMEDA DE LAS PULGAS 499 WASHINGTON BLVD Address Address **SUITE 810**

SUITE 125

SAN MATEO CA 94403 JERSEY CITY NJ 07310 City-State-Zip: City-State-Zip:

Title **DIRECTOR**

DENTON, STEVEN Name

1 CALIFORNIA STREET Address

SUITE 400

SAN FRANCISCO CA 94111 City-State-Zip:

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: FRANK MAMMARO

Electronic Signature of Signing Officer/Director Detail

TREASURER

04/30/2024