

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 801165

**FILED**  
**Apr 22, 2022**  
**Secretary of State**  
**5076562960CC**

**Entity Name:** AIU INSURANCE COMPANY

**Current Principal Place of Business:**

1271 AVENUE OF THE AMERICAS  
37 FLOOR  
NEW YORK, NY 10020

**Current Mailing Address:**

1271 AVENUE OF THE AMERICAS  
37 FLOOR  
NEW YORK, NY 10020 US

**FEI Number:** 13-5303710

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
PO BOX 6200 (32314-6200)  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 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

**Officer/Director Detail :**

Title SECRETARY  
Name KENT, TANYA  
Address 1271 AVENUE OF THE AMERICAS  
37 FLOOR  
City-State-Zip: NEW YORK NY 10020

Title TREASURER  
Name HIRSCH, MARILYN V.  
Address 1271 AVENUE OF THE AMERICAS  
37 FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name BOLT, THOMAS  
Address 1271 AVENUE OF THE AMERICAS  
37 FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name RABL, WILLIAM  
Address 1271 AVENUE OF THE AMERICAS  
37 FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name RIEGLER, KENNETH  
Address 1271 AVENUE OF THE AMERICAS  
37 FLOOR  
City-State-Zip: NEW YORK NY 10020

Title PRESIDENT, DIRECTOR  
Name PRICE, MICHAEL  
Address 1271 AVENUE OF THE AMERICAS  
37 FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name CONNOLLY, THOMAS C.  
Address 1271 AVENUE OF THE AMERICAS  
37 FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name LYONS, MARK  
Address 1271 AVENUE OF THE AMERICAS  
37 FLOOR  
City-State-Zip: NEW YORK NY 10020

*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:** TANYA KENT

**SECRETARY**

**04/22/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date