## NEW YORK, NY 10020 US

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Entity Name: GRANITE STATE INSURANCE COMPANY

**Current Principal Place of Business:** 

1271 AVENUE OF THE AMERICAS

#### FEI Number: 02-0140690

**DOCUMENT# 801803** 

**500 WEST MADISON STREET** 

**Current Mailing Address:** 

**SUITE 3000** CHICAGO, IL 60661

37TH FLOOR

# Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 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

### Officer/Director Detail :

Officer/Director Detail :			
Title	SECRETARY	Title	TREASURER
Name	KENT, TANYA E.	Name	HIRSCH, MARILYN V.
Address	1271 AVENUE OF THE AMERICAS	Address	1271 AVENUE OF THE AMERICAS
City-State-Zip:	NEW YORK NY 10020	City-State-Zip:	NEW YORK NY 10020
Title	PRESIDENT, DIRECTOR	Title	DIRECTOR
Name	MCELROY, DAVID H.	Name	MCCLEEREY, KYM A.
Address	1271 AVENUE OF THE AMERICAS	Address	1271 AVENUE OF THE AMERICAS
City-State-Zip:	NEW YORK NY 10020	City-State-Zip:	NEW YORK NY 10020
Title	DIRECTOR	Title	DIRECTOR
Title Name	DIRECTOR KIRCHGESSNER, JOSEPH MICHAEL	Title Name	DIRECTOR FISH, BRIAN
Name	KIRCHGESSNER, JOSEPH MICHAEL	Name	FISH, BRIAN
Name Address	KIRCHGESSNER, JOSEPH MICHAEL 500 WEST MADISON STREET	Name Address City-State-Zip: Title	FISH, BRIAN 500 WEST MADISON STREET CHICAGO IL 60661 DIRECTOR
Name Address City-State-Zip:	KIRCHGESSNER, JOSEPH MICHAEL 500 WEST MADISON STREET CHICAGO IL 60661	Name Address City-State-Zip: Title Name	FISH, BRIAN 500 WEST MADISON STREET CHICAGO IL 60661 DIRECTOR FITZPATRICK, JOSEPH A.
Name Address City-State-Zip: Title	KIRCHGESSNER, JOSEPH MICHAEL 500 WEST MADISON STREET CHICAGO IL 60661 DIRECTOR	Name Address City-State-Zip: Title	FISH, BRIAN 500 WEST MADISON STREET CHICAGO IL 60661 DIRECTOR
Name Address City-State-Zip: Title Name	KIRCHGESSNER, JOSEPH MICHAEL 500 WEST MADISON STREET CHICAGO IL 60661 DIRECTOR RIEGLER, KENNETH	Name Address City-State-Zip: Title Name	FISH, BRIAN 500 WEST MADISON STREET CHICAGO IL 60661 DIRECTOR FITZPATRICK, JOSEPH A. 500 WEST MADISON STREET SUITE 3000

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 E. KENT

Electronic Signature of Signing Officer/Director Detail

FILED

Certificate of Status Desired: No

Date

Date