

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 807448

Entity Name: PENN MILLERS INSURANCE COMPANY**Current Principal Place of Business:**436 WALNUT STREET
PHILADELPHIA , PA 19106**Current Mailing Address:**436 WALNUT STREET
P.O. BOX 1000
PHILADELPHIA , PA 19106 US**FEI Number:** 24-0686200**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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	DIRECTOR
Name	LUPICA, JOHN J
Address	436 WALNUT STREET
City-State-Zip:	PHILADELPHIA PA 19106

Title	DIRECTOR, EVP, GC
Name	SANPIETRO, JAMES SCOTT
Address	550 MADISON AVE.
City-State-Zip:	NEW YORK NY 10022

Title	DIRECTOR
Name	JOHNSON, LATRELL
Address	202 HALLS MILL ROAD
City-State-Zip:	WHITEHOUSE STATION NJ 08889

Title	SECRETARY
Name	PEENE, BRANDON
Address	550 MADISON AVE. 36TH FLOOR
City-State-Zip:	NEW YORK NY 10022

Title	ASSISTANT SECRETARY
Name	BALLESTEROS, MADELYN A
Address	202 HALLS MILL ROAD
City-State-Zip:	WHITEHOUSE STATION NJ 08889

Title	DIRECTOR
Name	CLOUSER, CAROLINE
Address	202 HALLS MILL ROAD
City-State-Zip:	WHITEHOUSE STATION NJ 08889

Title	DIRECTOR, TREASURY
Name	HARKIN, KEVIN
Address	202 HALLS MILL ROAD
City-State-Zip:	WHITEHOUSE NJ 08889

Title	DIRECTOR, PRESIDENT
Name	ORTEGA , JUAN LUIS
Address	202A HALL'S MILL ROAD
City-State-Zip:	WHITEHOUSE STATION NJ 08889

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: MADELYN BALLESTEROS**ASSISTANT SECRETARY** 01/09/2025_____
Electronic Signature of Signing Officer/Director Detail_____
Date