

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 808202

Entity Name: CANAL INSURANCE COMPANY

Current Principal Place of Business:

101 N. MAIN ST., STE. 400
GREENVILLE, SC 29601

Current Mailing Address:

101 N. MAIN ST., STE. 400
GREENVILLE, SC 29601 US

FEI Number: 57-0133332

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
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

Officer/Director Detail :

Title PRESIDENT & CEO, DIRECTOR
Name BROCKLEBANK, PAUL WILLIAM
Address 101 N. MAIN ST., STE. 400
City-State-Zip: GREENVILLE SC 29601

Title TREASURER
Name RZEPINSKI, JOHN E.
Address 101 N. MAIN ST., STE. 400
City-State-Zip: GREENVILLE SC 29601

Title VP
Name GREENE, CHRISTOPHER B.
Address 101 N. MAIN ST., STE. 400
City-State-Zip: GREENVILLE SC 29601

Title SECRETARY
Name COLVIN, ANDREW E
Address 101 N. MAIN ST., STE. 400
City-State-Zip: GREENVILLE SC 29601

Title DIRECTOR
Name PELHAM CULLEN, ANN
Address 101 N. MAIN ST., STE. 400
City-State-Zip: GREENVILLE SC 29601

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: ANDREW E. COLVIN

SECRETARY

04/25/2024

Electronic Signature of Signing Officer/Director Detail

Date