2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 819105

Entity Name: AMERICAN SUMMIT INSURANCE COMPANY

Current Principal Place of Business:

6031 CONNECTION DRIVE

SUITE 250

IRVING, TX 75039

Current Mailing Address:

6031 CONNECTION DRIVE

SUITE 250

IRVING, TX 75039 US

FEI Number: 41-0776214 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

IRVING TX 75039

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: CHIEF FINANCIAL OFICER 03/11/2025

Electronic Signature of Registered Agent

Date

FILED Mar 11, 2025

Secretary of State

1361798550CC

Officer/Director Detail:

City-State-Zip:

PRESIDENT Title Title DIRECTOR

MCAULIFFE. TIM J JR. DUFFY, PATRICK JOSEPH Name Name

Address 6031 CONNECTION DRIVE Address 6031 CONNECTION DRIVE SUITE 250

SUITE 250

City-State-Zip:

IRVING TX 75039

IRVING TX 75039 IRVING TX 75039 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title DIRECTOR

DISCH, JUSTIN RYAN GOODE, DOUGLAS EDWIN Name Name

6031 CONNECTION DRIVE 6031 CONNECTION DRIVE Address Address

SUITE 250 SUITE 250

Title SECRETARY, DIRECTOR Title **TREASURER**

CASTLE, KRISTINA LYN KIRK, RODNEY JERRY Name Name

6031 CONNECTION DRIVE Address

6031 CONNECTION DRIVE Address SUITE 250 SUITE 250

City-State-Zip: IRVING TX 75039 City-State-Zip: IRVING TX 75039

Title **DIRECTOR** Title **DIRECTOR**

WAGNER, JONATHAN JAMES LIPPINCOTT, GRANT EDWARD Name Name

Address 6031 CONNECTION DRIVE Address 6031 CONNECTION DRIVE

> SUITE 250 SUITE 250

City-State-Zip: IRVING TX 75039 City-State-Zip: IRVING TX 75039

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.

03/11/2025 SIGNATURE: KRISTINA LYN CASTLE SECRETARY