

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 825007

**Entity Name:** SOMPO AMERICA INSURANCE COMPANY

**Current Principal Place of Business:**

1221 AVENUE OF THE AMERICAS  
19TH FLOOR  
NEW YORK, NY 10020

**Current Mailing Address:**

11405 NORTH COMMUNITY HOUSE ROAD  
SUITE 600  
CHARLOTTE, NC 28277

**FEI Number:** 13-2554270

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
200E. 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 SECRETARY  
Name LURIE, DANIEL S.  
Address 4 MANHATTANVILLE ROAD  
City-State-Zip: PURCHASE NY 10577

Title TREASURER  
Name HANA, ENTELA  
Address 4 MANHATTANVILLE ROAD  
City-State-Zip: PURCHASE NY 10577

Title DIRECTOR  
Name GOSHEN, BRIAN W.  
Address 3780 MANSELL ROAD  
4TH FLOOR  
City-State-Zip: ALPHARETTA GA 30022

Title DIRECTOR  
Name LAWRENCE, WINDY  
Address 4 MANHATTANVILLE ROAD  
City-State-Zip: PURCHASE NY 10577

Title DIRECTOR  
Name SPARRO, CHRISTOPHER L.  
Address 1221 AVENUE OF THE AMERICAS  
City-State-Zip: NEW YORK NY 10577

Title DIRECTOR  
Name GALLAGHER, CHRISTOPHER B.  
Address 100 PITTS BAY ROAD  
City-State-Zip: PEMBROKE BERMUDA HM08

Title DIRECTOR  
Name HANA, ENTELA  
Address 4 MANHATTANVILLE ROAD  
City-State-Zip: PURCHASE NY 10577

Title DIRECTOR  
Name MCGUIRE, MICHAEL  
Address WATERLOO HOUSE  
100 PITTS BAY ROAD  
City-State-Zip: PEMBROKE HM08

*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:** DANIEL S. LURIE

**SECRETARY**

**04/20/2022**

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

\_\_\_\_\_  
Date