## 2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 839686** 

Entity Name: ALLIANZ GLOBAL RISKS US INSURANCE COMPANY

**FILED** Mar 28, 2022 **Secretary of State** 0584654502CC

## **Current Principal Place of Business:**

225 W. WASHINGTON STREET SUITE 800 CHICAGO, IL 60606-3484

## **Current Mailing Address:**

225 W. WASHINGTON STREET SUITE 800 CHICAGO, IL 60606-3484 US

FEI Number: 95-3187355 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES STREET BOX 6200

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:

Address

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title CFO

Name MUELLER, JOACHIM Name COSTE-LEPOUTRE, CLAIRE-MARIE

FRITZ SCHAFFER - STR. 9 FRITZ SCHAFFER - STR. 9 Address Address

MUNCHEN GERMANY 81737 City-State-Zip: MUNCHEN GERMANY 81737 City-State-Zip:

DIRECTOR, CFO Title CHIEF EXECUTIVE OFFICER & Title **PRESIDENT** 

Name DAVIS, PAUL

SCALDAFERRI, WILLIAM Name Address 225 WEST WASHINGTON STREET

City-State-Zip:

28 LIBERTY STREET . 37TH FLOOR **SUITE 1800** 

NEW YORK NY 10005 City-State-Zip:

**SECRETARY** Title

FAWCETT, WILLIAM Name

225 WEST WASHINGTON STREET Address

**SUITE 1800** 

City-State-Zip: CHICAGO FL 60606

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: WILLIAM FAWCETT

SECRETARY

CHICAGO IL 60606

03/28/2022