## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 851773** 

**Entity Name: METROPOLITAN GENERAL INSURANCE COMPANY** 

FILED
Apr 28, 2014
Secretary of State
CC9794271760

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

700 QUAKER LANE WARWICK. RI 02886-6669

# **Current Mailing Address:**

700 QUAKER LANE-AREA 3D P O BOX 350 WARWICK, RI 02887

FEI Number: 22-2342710 Certificate of Status Desired: Yes

## 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	CHAIRMAN, PRESIDENT	Title	TREASURER
Name	PONNAVOLU, KISHORE	Name	DEBEL, MARLENE B

Address 700 QUAKER LANE Address 1095 AVENUE OF THE AMERICAS

City-State-Zip: WARWICK RI 02886 City-State-Zip: NEW YORK NY 10036

Title SECRETARY Title SRV

NameTRAVERS, MAURA CNameWALSH, MICHAEL CAddress700 QUAKER LANEAddress700 QUAKER LANECity-State-Zip:WARWICK RI 02886City-State-Zip:WARWICK RI 02886

Title VP, CFO, DIRECTOR Title VP, GENERAL COUSEL Name SPONTAK, RALPH G NOSTRAMO, ROBERT F Name Address 700 QUAKER LANE Address 700 QUAKER LANE City-State-Zip: WARWICK RI 02886 City-State-Zip: WARWICK RI 02886

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: MAURA C. TRAVERS

**SECRETARY** 

04/28/2014