

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 851978

**Entity Name:** STARSTONE NATIONAL INSURANCE COMPANY

**Current Principal Place of Business:**

201 E. FIFTH STREET,  
SUITE 1200  
CINCINNATI, OH 45202

**Current Mailing Address:**

201 E. FIFTH STREET,  
SUITE 1200  
CINCINNATI, OH 45202 US

**FEI Number:** 95-1429618

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
200 E. GAINES STREET  
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	PRESIDENT	Title	TREASURER/CFO, DIRECTOR
Name	CONSOLINO, JEFF	Name	SINCO, RUSSELL
Address	201 E. FIFTH STREET, SUITE 1200	Address	201 E. FIFTH STREET, SUITE 1200
City-State-Zip:	CINCINNATI OH 45202	City-State-Zip:	CINCINNATI OH 45202
Title	SECRETARY	Title	ASSISTANT SECRETARY
Name	KUZLOSKI, ROBERT	Name	LAUTERBACH, ERIKALYN
Address	201 E. FIFTH STREET, SUITE 1200	Address	201 E. FIFTH STREET, SUITE 1200
City-State-Zip:	CINCINNATI OH 45202	City-State-Zip:	CINCINNATI OH 45202
Title	VP	Title	VP
Name	SIMEONE, PAUL	Name	REITWIESNER, JOHN
Address	201 E. FIFTH STREET, SUITE 1200	Address	201 E. FIFTH STREET, SUITE 1200
City-State-Zip:	CINCINNATI OH 45202	City-State-Zip:	CINCINNATI OH 45202
Title	DIRECTOR		
Name	WANAMAKER, JEFF		
Address	201 E. FIFTH STREET, SUITE 1200		
City-State-Zip:	CINCINNATI OH 45202		

*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:** ROBERT KUZLOSKI

**SECRETARY**

**02/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date