

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 851978

**Entity Name:** STARSTONE NATIONAL INSURANCE COMPANY**Current Principal Place of Business:**HABORSIDE FINANCIAL CENTER  
PLAZA 5 SUITE 2600  
JERSEY CITY, NJ 07311**Current Mailing Address:**HABORSIDE FINANCIAL CENTER  
PLAZA 5 SUITE 2600  
JERSEY CITY, NJ 07311 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  
Name            BROWN, JR., NORMAN L. PRESIDENT  
Address        HARBORSIDE FINANCIAL CENTER  
                 PLAZA 5 SUITE 2600  
City-State-Zip: JERSEY CITY NJ 07311

Title            SVP, TREASURER & CFO  
Name            HUANG, MIN  
Address        HARBORSIDE FINANCIAL CENTER  
                 PLAZA 5 SUITE 2600  
City-State-Zip: JERSEY CITY NJ 07311

Title            DIRECTOR  
Name            REDPATH, ROBERT DIRECTOR  
Address        HARBORSIDE FINANCIAL CENTER  
                 PLAZA 5 SUITE 2600  
City-State-Zip: JERSEY CITY NJ 07311

Title            SECRETARY  
Name            VALENZUELA, CONCEPCION L  
                 SECRETARY  
Address        1100 W. TOWN & COUNTRY ROAD  
                 SUITE 1500  
City-State-Zip: ORANGE CA 92868

Title            DIRECTOR  
Name            NICHOLS, TOM DIRECTOR  
Address        HARBORSIDE FINANCIAL CENTER  
                 PLAZA 5 SUITE 2600  
City-State-Zip: JERSEY CITY NJ 07311

Title            EXECUTIVE VICE PRESIDENT  
Name            TRIMBLE, JR., ROBERT LINCOLN  
Address        HARBORSIDE FINANCIAL CENTER  
                 PLAZA 5 SUITE 2600  
City-State-Zip: JERSEY CITY NJ 07311

*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:** MIN HUANG

SVP, TREASURER &amp; CFO    03/04/2016

Electronic Signature of Signing Officer/Director Detail

Date