

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 857724

**FILED  
Apr 20, 2022  
Secretary of State  
9328233126CC**

**Entity Name:** AIG ASSURANCE COMPANY

**Current Principal Place of Business:**

500 WEST MADISON STREET  
SUITE 3000  
CHICAGO, IL 60661

**Current Mailing Address:**

1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
NEW YORK, NY 10020 US

**FEI Number:** 02-6008643

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST  
TALLAHASSEE, FL 32399 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 KENT, TANYA E.  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020

Title TREASURER  
Name HIRSCH, MARILYN V.  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020

Title PRESIDENT, DIRECTOR  
Name PRICE, MICHAEL D.  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name FITZPATRICK, JOSEPH  
Address 500 WEST MADISON STREET  
SUITE 3000  
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR  
Name MCCLEEREY, KYM A.  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name KIRCHGESSNER, JOSEPH MICHAEL  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name BOLT, THOMAS  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name CONNOLLY, THOMAS C.  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020

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*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:** TANYA E. KENT

**SECRETARY**

**04/20/2022**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name FISH, BRIAN  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020

Title DIRECTOR  
Name LYONS, MARK  
Address 1271 AVENUE OF THE AMERICAS  
37TH FLOOR  
City-State-Zip: NEW YORK NY 10020