

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000005056

**Entity Name:** CATLIN INSURANCE COMPANY, INC.**Current Principal Place of Business:**C/O THE CORPORATION TRUST CO,  
1999 BRYAN STREET SUITE 900  
DALLAS, TX 75201**Current Mailing Address:**677 WASHINGTON BLVD  
10TH FLOOR, SUITE 1000  
STAMFORD, CT 06901 US**FEI Number:** 20-4929941**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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 VP, TREASURER  
Name SALJANIN, MARY  
Address 677 WASHINGTON BLVD  
10TH FLOOR, SUITE 1000  
City-State-Zip: STAMFORD CT 06901

Title SENIOR VICE PRESIDENT  
Name MIMS, SARAH B  
Address 505 EAGLEVIEW BLVD  
5TH FLOOR  
City-State-Zip: EXTON PA 19341

Title SENIOR VICE PRESIDENT, CFO  
Name NORRIS, JAMES M  
Address 677 WASHINGTON BLVD  
10TH FLOOR, SUITE 1000  
City-State-Zip: STAMFORD CT 06901

Title DIRECTOR, PRESIDENT, CEO  
Name PILKO, LUCY  
Address 225 LIBERTY STREET  
City-State-Zip: NEW YORK NY 10281

Title SENIOR VICE PRESIDENT  
Name DIVIRGILIO, JAMES M  
Address 100 CONSTITUTION PLAZA  
City-State-Zip: HARTFORD CT 06103

Title DIRECTOR, EXECUTIVE VICE  
PRESIDENT  
Name NADEAU, DONNA M  
Address 225 LIBERTY STREET  
City-State-Zip: NEW YORK NY 10281

Title VP, SECRETARY  
Name PERKINS, TONI A  
Address 677 WASHINGTON BLVD  
10TH FLOOR, SUITE 1000  
City-State-Zip: STAMFORD CT 06901

Title VP, CONTROLLER  
Name WILL, ANDREW R  
Address 677 WASHINGTON BLVD  
10TH FLOOR, SUITE 1000  
City-State-Zip: STAMFORD CT 06901

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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:** KAREN M CLAUSI**ASSISTANT SECRETARY** 04/01/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name CLAUSI, KAREN M  
Address 677 WASHINGTON BLVD  
10TH FLOOR, SUITE 1000  
City-State-Zip: STAMFORD CT 06901

Title DIRECTOR  
Name BUSE, CHRISTOPHER  
Address 1 STAR POINT  
4TH FLOOR, NORTH TOWER  
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR  
Name HARLIN, GERALD  
Address 33 RUE HENRI DE REGNIER  
City-State-Zip: VERSAILLES 78000

Title DIRECTOR  
Name RIGNAULT, JEAN-PAUL  
Address 192 CHEMIN DU MAS D AYRAN  
City-State-Zip: ST QUENTIN LA POTERIE 30700

Title ASSISTANT SECRETARY, GENERAL COUNSEL  
Name CARVAJAL, LIESEL  
Address 225 LIBERTY STREET  
City-State-Zip: NEW YORK NY 10281

Title VP  
Name DITARANTO, MARK  
Address 1 STAR POINT  
4TH FLOOR, NORTH TOWER  
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR  
Name DE PERETTI, JACQUES  
Address 25 AVENUE MATIGNON  
City-State-Zip: PARIS 75008

Title DIRECTOR  
Name PIAZZOLLA, SALVATORE  
Address 22 BYFIELD LANE  
City-State-Zip: GREENWICH CT 06830

Title DIRECTOR  
Name ROY, JOHN M  
Address 330 EAST 79TH STREET  
APT. 10A  
City-State-Zip: NEW YORK NY 10075

Title DIRECTOR  
Name LACK, KATHRYN "KATY"  
Address 225 LIBERTY STREET  
City-State-Zip: NEW YORK NY 10281