

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002153

Entity Name: HOUSING ENTERPRISE INSURANCE COMPANY, INC.**Current Principal Place of Business:**14 IRONWOOD LANE
SWANTON, VT 05488**Current Mailing Address:**PO BOX 189
189 COMMERCE COURT
CHESHIRE, CT 06410-0189**FEI Number:** 06-1597889**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
2894 REMINGTON GREEN LANE
SUITE A
TALLAHASSEE, FL 32308 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	DIRECTOR
Name	DZEMA, DOUGLAS
Address	881 AMBOY AVE
City-State-Zip:	PERTH AMBOY NJ 08862

Title	DIRECTOR
Name	YOUNG, RUSSELL
Address	150 SOUTH CHAMPLAIN ST
City-State-Zip:	BURLINGTON VT 05402

Title	PRESIDENT
Name	MALASPINA, EDMUND
Address	PO BOX 189 189 COMMERCE COURT
City-State-Zip:	CHESHIRE CT 06410-0189

Title	SECRETARY
Name	GALVIN, AMY
Address	PO BOX 189 189 COMMERCE COURT
City-State-Zip:	CHESHIRE CT 06410-0189

Title	ASST. SECRETARY
Name	HORN, TREVOR
Address	PO BOX 189 189 COMMERCE COURT
City-State-Zip:	CHESHIRE CT 06410-0189

Title	DIRECTOR
Name	BERTRAND, SCOTT
Address	1 PEARSON WAY
City-State-Zip:	ENFIELD CT 06082

Title	DIRECTOR
Name	HINOJOSA, ED
Address	818 SOUTH FLORES STREET
City-State-Zip:	SAN ANTONIO TX 78295

Title	DIRECTOR
Name	PEARSON, VINCE D
Address	801 12TH STREET
City-State-Zip:	SACRAMENTO CA 95814

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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: AMY GALVIN**SECRETARY****01/17/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHAIRMAN
Name PATTERSON, JEFFERY
Address 8120 KINSMAN ROAD
City-State-Zip: CLEVELAND OH 44104

Title VC
Name ANIBAN, FERNANDO
Address 809 NORTH BROADWAY
City-State-Zip: MILWAUKEE WI 53202

Title TREASURER
Name LAGONIGRO, PAUL
Address 189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410

Title DIRECTOR
Name SMITH, MARY
Address 17533 MAPLE DR.
City-State-Zip: LANSING IL 60438

Title EXECUTIVE VICE-PRESIDENT, ASSISTANT
TREASURER
Name LEPAGE, TROY
Address 189 COMMERCE COURT
P.O. BOX 189
City-State-Zip: CHESHIRE CT 06410

Title DIRECTOR
Name ANTHONY, JOHNSON
Address 249 MILBANK AVE.
City-State-Zip: GREENICH CT 06830

Title VICE PRESIDENT
Name SULLIVAN, SHERRY
Address 189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410

Title DIRECTOR
Name SMITH, JANE
Address 300 S. ROCK SPRINGS STREET
City-State-Zip: ATHENS GA 30603

Title DIRECTOR
Name LOSO, KEVIN
Address 5 TREMONT STREET
City-State-Zip: RUTLAND VT 05701

Title DIRECTOR
Name BROWNE, RICHARD
Address 946 GEORGETOWN RD
City-State-Zip: SWARTHMORE PA 19081

Title DIRECTOR
Name ZISSIMOS, MARIA
Address 1111 AVENUE OF THE STATES
City-State-Zip: CHESTER PA 19013