

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002153

Entity Name: HOUSING ENTERPRISE INSURANCE COMPANY, INC.

FILED
Feb 03, 2014
Secretary of State
CC8096964304

Current Principal Place of Business:

148 COLLEGE STREET
SUITE 204
BURLINGTON, VT 05401

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.
155 OFFICE PLAZA DR., SUITE A
TALLAHASSEE, FL 32301 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 D
Name LOWNDES, EDWIN
Address 301 E ARMOUR BLVD
City-State-Zip: KANSAS MO 64111

Title D
Name REDDING, GLEN
Address 807 S LOWRY
City-State-Zip: STILLWATER OK 74074

Title D
Name DIPAOLO, JAMES
Address 777 GRANT ST
City-State-Zip: DENVER CO 80203

Title D
Name DZEMA, DOUGLAS
Address 881 AMBOY AVE
City-State-Zip: PERTH AMBOY NJ 08862

Title D
Name WILLIAMS, JOHN
Address 1000 WYNNNTON ROAD
City-State-Zip: COLUMBUS GA 31906

Title D
Name PRESS, RICHARD S
Address 101 BOGLE ST
City-State-Zip: WESTON MA 02493-1056

Title DIRECTOR
Name WILLIS, LINNIE
Address 435 NEBRASKA AVE
City-State-Zip: TOLEDO OH

Title DIRECTOR
Name LABRIE, DAN
Address PO BOX 189
189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410-0189

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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: SARAH RODRIGUEZ

ASST. TREASURER

02/03/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LOVE, TONY
Address 4500 INKSTER ROAD
City-State-Zip: INKSTER MI

Title DIRECTOR
Name HART, CHRISTINE
Address PO BOX 2275
City-State-Zip: BRATTLEBORO VT

Title DIRECTOR
Name SHULDINER, JOSEPH
Address 1511 CENTRAL PARK AVE
City-State-Zip: YONKERS NY

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

Title VP
Name LEWELLYN, WILLIAM
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. TREASURER
Name RODRIGUEZ, SARAH
Address PO BOX 189
189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410

Title DIRECTOR
Name EASTMAN, LEE
Address 931 BOOKER STREET
City-State-Zip: AUBURN AL

Title DIRECTOR
Name WASSON, GARY
Address PO BOX 2669
City-State-Zip: DANVILLE VA

Title DIRECTOR
Name YOUNG, RUSSELL
Address 100 EAST STATE STREET
City-State-Zip: MONTPELIER VT

Title TREASURER
Name WILSON, MARK
Address PO BOX 189
189 COMMERCE COURT
City-State-Zip: CHESHIRE CT 06410-0189

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

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