

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000002971

**Entity Name:** PREMIER ACCESS INSURANCE COMPANY**Current Principal Place of Business:**8890 CAL CENTER DRIVE  
SACRAMENTO, CA 95826**Current Mailing Address:**8890 CAL CENTER DRIVE  
SACRAMENTO, CA 95826**FEI Number:** 91-1857813**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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 CFO  
Name OSWALD, MATTHEW J.  
Address 6255 STERNERS WAY  
THE GUARDIAN LIFE INSURANCE  
COMPANY OF AMERICA  
City-State-Zip: BETHLEHEM PA 18017

Title DIRECTOR  
Name SWANKER, CHRISTOPHER T.  
Address 6255 STERNERS WAY  
THE GUARDIAN LIFE INSURANCE  
COMPANY OF AMERICA  
City-State-Zip: BETHLEHEM PA 18017

Title DIRECTOR  
Name DUFFY, BRENDAN  
Address 6255 STERNERS WAY  
THE GUARDIAN LIFE INSURANCE  
COMPANY OF AMERICA  
City-State-Zip: BETHLEHEM PA 18017

Title PRESIDENT  
Name REAMER, MICHAEL P.  
Address 10324 S. DOLFIELD ROAD  
City-State-Zip: OWINGS MILLS MD 21117

Title TREASURER  
Name SKINNER, WALTER R.  
Address 10 HUDSON YARDS  
THE GUARDIAN LIFE INSURANCE  
COMPANY OF AMERICA  
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR  
Name FRADKIN, MICHAEL A.  
Address 101 CRAWFORDS CORNER ROAD  
THE GUARDIAN LIFE INSURANCE  
COMPANY OF AMERICA  
City-State-Zip: HOLMDEL NJ 07733

Title SECRETARY  
Name THOMAS, CHERITA L.  
Address 10 HUDSON YARDS  
THE GUARDIAN LIFE INSURANCE  
COMPANY OF AMERICA  
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR  
Name SCANLON, BRIAN L.  
Address 10 HUDSON YARDS  
THE GUARDIAN LIFE INSURANCE  
COMPANY OF AMERICA  
City-State-Zip: NEW YORK NY 10001

*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:** CHERITA L. THOMAS**SECRETARY****01/24/2020**

Electronic Signature of Signing Officer/Director Detail

Date