

2014 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:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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 CEO
Name ABBASZADEH, REZA
Address 8890 CAL CENTER DRIVE
City-State-Zip: SACRAMENTO CA 95826

Title D
Name RAMEY, JOHN
Address 8890 CAL CENTER DRIVE
City-State-Zip: SACRAMENTO CA 95826

Title D
Name ABBASZADEH, DEBRA
Address 8890 CAL CENTER DRIVE
City-State-Zip: SACRAMENTO CA 95826

Title CFO
Name HIDEO, KAKIUCHI
Address 8890 CAL CENTER DRIVE
City-State-Zip: SACRAMENTO CA 95826

Title CMO, DIRECTOR
Name FULTON, RICHARD
Address 8890 CAL CENTER DRIVE
City-State-Zip: SACRAMENTO CA 95826

Title DIRECTOR
Name ELDER, JEFFREY
Address 440 CROCKER ROAD
City-State-Zip: SACRAMENTO CA 95864

Title DIRECTOR
Name KOTHANDARAMAN, ARULKANNAN
Address 5 FIRST MAIN ROAD
FLAT-2A, GANDHI NAGAR ADYAR
City-State-Zip: CHENNAI 600020

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: HIDEO KAKIUCHI

CFO

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date