

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000002303

**Entity Name:** HCC CASUALTY INSURANCE SERVICES, INC.**Current Principal Place of Business:**2300 CLAYTON ROAD  
SUITE 1100  
CONCORD, CA 94520**Current Mailing Address:**2300 CLAYTON ROAD  
SUITE 1100  
CONCORD, CA 94520 US**FEI Number:** 68-0101584**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC  
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 VICE PRESIDENT & SECRETARY  
Name LUDLOW, ALEXANDER  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title PRESIDENT  
Name CALLAHAN, MARK W  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title CFO  
Name MANGINI, JEFFREY F  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title VP  
Name BEEMER, LAWRENCE  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title VP  
Name IACOBELL, SHELLY L  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title VP  
Name KASHETA, LAUREN  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title VP  
Name LEARY, KYRA  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title VP  
Name RECKA, PETER A  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

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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:** LUDLOW , ALEXANDER**SECRETARY****04/28/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name RIFFE, DEBORAH L  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title VP  
Name RINICELLA, RANDY D  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title DIRECTOR  
Name RIVERA, SUSAN  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title VP  
Name GUPPY, JENNIFER  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title VP, TREASURER  
Name LEE, JONATHAN  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520

Title DIRECTOR  
Name WEIST, THOMAS E  
Address 2300 CLAYTON ROAD  
SUITE 1100  
City-State-Zip: CONCORD CA 94520