

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000005513

**Entity Name:** VANTAPRO SPECIALTY INSURANCE COMPANY

**Current Principal Place of Business:**

199 WATER STREET  
NEW YORK, NY 10038

**Current Mailing Address:**

199 WATER STREET  
NEW YORK, NY 10038 US

**FEI Number: 36-3774557**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32339 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 CARMILANI, SCOTT A  
Address 199 WATER STREET  
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR  
Name DUPONT, WESLEY D.  
Address 199 WATER STREET  
City-State-Zip: NEW YORK NY 10038

Title D/P  
Name IGLESIAS, LOUIS  
Address 199 WATER STREET  
City-State-Zip: NEW YORK NY 10038

Title D  
Name MCELROY, JOHN J  
Address 199 WATER STREET  
City-State-Zip: NEW YORK NY 10038

Title SECRETARY  
Name LEE, SUNG  
Address 199 WATER STREET  
City-State-Zip: NEW YORK NY 10038

Title TREASURER  
Name LARSON, ROBERT  
Address 199 WATER STREET  
City-State-Zip: NEW YORK NY 10038

*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: SUNG LEE**

**SECRETARY**

**04/30/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date