

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002405

Entity Name: CHUBB INDEMNITY INSURANCE COMPANY

Current Principal Place of Business:

1133 AVENUE OF AMERICAS
NEW YORK, NY 10036

Current Mailing Address:

C/O MADELYN BALLESTEROS
202A HALLS MILL ROAD
WHITEHOUSE STATION, NJ 08889 US

FEI Number: 22-3291862

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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 ASSISTANT SECRETARY
Name BALLESTEROS, MADELYN
Address 202A HALLS MILL ROAD
City-State-Zip: WHITEHOUSE STATION NJ 08889

Title DIRECTOR, PRESIDENT
Name LUPICA, JOHN J
Address 202B HALLS MILL ROAD
City-State-Zip: WHITEHOUSE STATION NJ 08889

Title SECRETARY
Name PEENE, BRANDON M
Address 1133 AVENUE OF AMERICAS
City-State-Zip: NEW YORK NY 10036

Title DIRECTOR, EVP
Name SANPIETRO, JAMES SCOTT
Address 1133 AVENUE OF AMERICAS
City-State-Zip: NEW YORK NY 10136

Title DIRECTOR
Name CLOUSER, CAROLINE
Address 202 HALLS MILL ROAD
City-State-Zip: WHITEHOUSE STATION NJ 08889

Title DIRECTOR
Name JOHNSON, LATRELL
Address 202 HALLS MILL ROAD
City-State-Zip: WHITEHOUSE STATION NJ 08889

Title DIRECTOR, TREASURER
Name HARKIN, KEVIN M.
Address 202 HALLS MILL ROAD
City-State-Zip: WHITEHOUSE STATION NJ 08889

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: MADELYN BALLESTEROS

ASSISTANT SECRETARY 01/03/2024

Electronic Signature of Signing Officer/Director Detail

Date