## 2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F96000004118

### Entity Name: CLEAR BLUE INSURANCE COMPANY

# **Current Principal Place of Business:**

225 WEST WASHINGTON STREET SUITE 1300 CHICAGO, IL 30302-3408

# **Current Mailing Address:**

B7 TABONUCO STREET SUITE 912 GUAYNABO, PR, 00968 PR

# FEI Number: 76-0227154

# Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 US FILED Mar 17, 2020 Secretary of State 2373552289CC

Certificate of Status Desired: Yes

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

### **Officer/Director Detail :**

	Title	PRESIDENT, DIRECTOR, CEO	Title	SVP, CFO & TREASURER
	Name	BRESLIN, JEROME	Name	DOWNEY, JEFFREY
	Address	B7 TABONUCO STREET SUITE 912	Address	B7 TABONUCO STREET SUITE 912
	City-State-Zip:	GUAYNABO, PR 00968	City-State-Zip:	GUAYNABO, PR 00968
	Title	COO, SVP	Title	SVP, BUSINESS DEVELOPMENT
	Name	KLOPE, PETER	Name	PALLADINO, SCOTT
	Address	B7 TABONUCO STREET SUITE 912	Address	200 SOUTH COLLEGE STREET SUITE 2250
	City-State-Zip:	GUAYNABO, PR 00968	City-State-Zip:	CHARLOTTE NC 28202
	Title	CHIEF RISK OFFICER, CHIEF ACTUARY	Title	EXECUTIVE VICE PRESIDENT, FINANCE
	Name	MANN, JAMES	Name	LEBRON, MANUEL
	Address	200 SOUTH COLLEGE STREET SUITE 2250	Address	B7 TABONUCO STREET SUITE 912
	City-State-Zip:	CHARLOTTE NC 28202	City-State-Zip:	GUAYNABO, PR 00968
	Title	EVP, GENERAL COUNSEL	Title	CHIEF COMPLIANCE OFFICER
	Name	KENNEDY, DANIEL	Name	RAMIREZ, OSVALDO SR.
	Address	225 WEST WASHINGTON STREET SUITE 2250	Address	B7 TABONUCO STREET SUITE 912
	City-State-Zip:	CHARLOTTE NC 28202	City-State-Zip:	GUAYNABO, PR 00968

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: OSVALDO RAMIREZ

#### CHIEF COMPLIANCE OFFICER

03/17/2020

Date

Electronic Signature of Signing Officer/Director Detail