## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F9700000052

**Entity Name: CLEARWATER INSURANCE COMPANY** 

**Current Principal Place of Business:** 

1209 ORANGE STREET WILMINGTON. DE 19801

**Current Mailing Address:** 

250 COMMERCIAL STREET SUITE 5000 MANCHESTER, NH 03101 US

FEI Number: 13-2781282 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

DIRECTOR, CEO, PRESIDENT Title Title DIRECTOR, SVP BENTLEY, NICHOLAS C BATOR, JOHN J Name Name

Address 250 COMMERCIAL STREET Address 250 COMMERCIAL STREET SUITE 5000

SUITE 5000

City-State-Zip: MANCHESTER NH 03101 City-State-Zip: MANCHESTER NH 03101

Title DIRECTOR, SVP Title DIRECTOR, GENERAL COUNSEL, SVP

FABIAN, RICHARD J Name CAROSELLI. NINA L Name

250 COMMERCIAL STREET 250 COMMERCIAL STREET Address Address

SUITE 5000 **SUITE 5000** 

City-State-Zip: MANCHESTER NH 03101 City-State-Zip: MANCHESTER NH 03101

Title SECRETARY Title VICE PRESIDENT Name SCOTT, SHERRYL Name KANT, ROBERT S

Address 250 COMMERCIAL STREET Address 250 COMMERCIAL STREET

SUITE 5000 **SUITE 5000** 

City-State-Zip: MANCHESTER NH 03101 City-State-Zip: MANCHESTER NH 03101

Title VICE PRESIDENT Title VP, ACTUARY

ZAMPELLA, JOSEPH Name SANDER, ELIZABETH A Name

250 COMMERCIAL STREET 300 FIRST STAMFORD PLACE Address Address

**SUITE 5000** 

City-State-Zip: STAMFORD CT 06902 MANCHESTER NH 03101 City-State-Zip:

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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.

03/04/2016 SIGNATURE: SHERRYL SCOTT **SECRETARY** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Mar 04, 2016

**Secretary of State** 

CC3318174275

## Officer/Director Detail Continued:

VΡ

Title

Title Title ASST. SECRETARY SPENCER, MELODY Name RUBIN, JEFFREY M Name

Address 300 FIRST STAMFORD PLACE Address 2850 LAKE VISTA DRIVE

SUITE 150 STAMFORD CT 06902 City-State-Zip: City-State-Zip: LEWISVILLE TX 75067

Title ASST. SECRETARY, VP Title ASSISTANT CONTROLLER

Name WHITAKER, DOROTHY D Name BUTCHARD, MARLENE Address 2850 LAKE VISTA DRIVE, SUITE 150

Address 250 COMMERCIAL STREET

**SUITE 5000** City-State-Zip: LEWISVILLE TX 75067 MANCHESTER NH 03101 City-State-Zip:

Title VΡ BANNISTER, MARK Name

Name WEIKERS, ANN

Address 250 COMMERCIAL STREET **SUITE 5000** Address 250 COMMERCIAL STREET

SUITE 5000 MANCHESTER NH 03101 City-State-Zip:

MANCHESTER NH 03101 City-State-Zip:

DIRECTOR, CFO, TREASURER, SVP Title Title CHIEF ACTUARY, VP

IRVING, DEBORAH A Name Name KUNISH, MATTHEW W 250 COMMERCIAL STREET Address

SUITE 5000 250 COMMERCIAL STREET Address

City-State-Zip: MANCHESTER NH 03101 SUITE 5000

City-State-Zip: MANCHESTER NH 03101 VΡ Title

Title CONTROLLER, VP SIEGART, JOHN Name

AARONS, GARY Name 250 COMMERCIAL STREET Address

**SUITE 5000** Address 250 COMMERCIAL STREET

MANCHESTER NH 03101 City-State-Zip: **SUITE 5000** 

MANCHESTER NH 03101 City-State-Zip: