## 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001717

Entity Name: ESSEX NATIONAL INSURANCE AGENCY, INC.

FILED
Jun 10, 2014
Secretary of State
CC1750264577

## **Current Principal Place of Business:**

550 GATEWAY DRIVE SUITE 210

NAPA, CA 94558

**Current Mailing Address:** 

550 GATEWAY DRIVE SUITE 210 NAPA, CA 94558

FEI Number: 13-4048160 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

Officer/Director Detail:

Title PCEO Title D

Name DAVIS, SCOTT K Name DAVIS, SCOTT K

Address 550 GATEWAY DRIVE, SUITE 210 Address 550 GATEWAY DRIVE, SUITE 210

City-State-Zip: NAPA CA 94558 City-State-Zip: NAPA NY 94558

Title S Title SVPT

Name ALTON, KAREN Name COONEY, JOHN M

Address 550 GATEWAY DRIVE, SUITE 210 Address 550 GATEWAY DRIVE, SUITE 210

City-State-Zip: NAPA CA 94558 City-State-Zip: NAPA CA 94558

Title SVP

Name WARREN, GEDDES

Address 550 GATEWAY DRIVE, SUITE 210

City-State-Zip: NAPA CA 94558

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.

Date