

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07755

Entity Name: THE TOA REINSURANCE COMPANY OF AMERICA**Current Principal Place of Business:**177 MADISON AVE
MORRISTOWN, NJ 07962-1930**Current Mailing Address:**177 MADISON AVE
MORRISTOWN, NJ 07962-1930 US**FEI Number:** 13-2918573**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E GAINES ST
TALLAHASSEE, FL 32399-0300 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 CEO, DIRECTOR
Name SANFORD, RICHARD N
Address 177 MADISON AVE.
City-State-Zip: MORRISTOWN NJ 07962-1930

Title DIRECTOR, CFO, EVP
Name WALLMAN, NATHANIEL B
Address 177 MADISON AVE.
City-State-Zip: MORRISTOWN NJ 07962-1930

Title SECRETARY
Name MARTIN, BRADLEY
Address 177 MADISON AVENUE
City-State-Zip: MORRISTOWN NJ 07962-1930

Title SVP, FINANCE
Name CAREY, TIMOTHY
Address 177 MADISON AVE
City-State-Zip: MORRISTOWN NJ 07962-1930

Title EVP, COO, DIRECTOR
Name PISANO, RICHARD T
Address 177 MADISON AVE
City-State-Zip: MORRISTOWN NJ 07962-1930

Title DIRECTOR
Name CASCIO, MICHAEL J.
Address 177 MADISON AVE
City-State-Zip: MORRISTOWN NJ 07962-1930

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: TIMOTHY CAREY

SVP, FINANCE

02/17/2022

Electronic Signature of Signing Officer/Director Detail

Date