

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20208

Entity Name: DIGITAL AFFECT INSURANCE COMPANY**Current Principal Place of Business:**1177 AVENUE OF THE AMERICAS
15TH FLOOR
NEW YORK, NY 10036**Current Mailing Address:**76 ST. PAUL STREET
SUITE 500
BURLINGTON, VT 05401 US**FEI Number:** 13-3368745**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES STREET
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 CEO, PRESIDENT, DIRECTOR
Name BRUNE, DAVID
Address 1308 RACE STREET
SUITE 400
City-State-Zip: CINCINNATI OH 45202

Title CFO, VP, DIRECTOR
Name HOMM, ANGELA
Address 1308 RACE STREET
SUITE 400
City-State-Zip: CINCINNATI OH 45202

Title CHAIRMAN, DIRECTOR
Name REAR, ANDREW
Address 1308 RACE STREET
SUITE 400
City-State-Zip: CINCINNATI OH 45202

Title ASST. SECRETARY
Name METAYER, KYLE
Address 76 ST. PAUL STREET
SUITE 500
City-State-Zip: BURLINGTON VT 05401

Title GENERAL COUNSEL, SECRETARY,
DIRECTOR
Name HOENSCH, LAURA
Address 1308 RACE STREET
SUITE 400
City-State-Zip: CINCINNATI OH 45202

Title VP, TREASURER, DIRECTOR
Name KUHN, KENNETH
Address 1308 RACE STREET
SUITE 400
City-State-Zip: CINCINNATI OH 45202

Title VP, DIRECTOR
Name EISENBRAUN, STACEY
Address 1308 RACE STREET
SUITE 400
City-State-Zip: CINCINNATI OH 45202

Title VP
Name JOY, PETER
Address 76 ST. PAUL STREET
SUITE 500
City-State-Zip: BURLINGTON VT 05401

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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.

SIGNATURE: LAURA HOENSCH

GENERAL COUNSEL

04/07/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	KLEINER, ANDREAS
Address	1308 RACE STREET SUITE 400
City-State-Zip:	CINCINNATI OH 45202