

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 804275

**Entity Name:** TIG INSURANCE COMPANY

**Current Principal Place of Business:**

8880 RIO SAN DIEGO DRIVE  
SUITE 800  
SAN DIEGO, CA 92108

**Current Mailing Address:**

8880 RIO SAN DIEGO DRIVE  
SUITE 800  
SAN DIEGO, CA 92108 US

**FEI Number:** 94-1517098

**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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CEO  
Name BENTLEY, NICHOLAS C.  
Address 8880 RIO SAN DIEGO DRIVE  
SUITE 800  
City-State-Zip: SAN DIEGO CA 92108

Title TREASURER/CFO  
Name IRVING, DEBORAH A.  
Address 8880 RIO SAN DIEGO DRIVE  
SUITE 800  
City-State-Zip: SAN DIEGO CA 92108

Title SECRETARY  
Name BAUER, JOHN W.  
Address 8880 RIO SAN DIEGO DRIVE  
SUITE 800  
City-State-Zip: SAN DIEGO CA 92108

Title CHAIRMAN OF THE BOARD  
Name BENTLEY, NICHOLAS C.  
Address 8880 RIO SAN DIEGO DRIVE  
SUITE 800  
City-State-Zip: SAN DIEGO CA 92108

Title DIRECTOR  
Name BENTLEY, NICHOLAS C.  
Address 8880 RIO SAN DIEGO DRIVE  
SUITE 800  
City-State-Zip: SAN DIEGO CA 92108

Title DIRECTOR  
Name IRVING, DEBORAH A.  
Address 8880 RIO SAN DIEGO DRIVE  
SUITE 800  
City-State-Zip: SAN DIEGO CA 92108

Title DIRECTOR  
Name KUNISH, MATTHEW W.  
Address 8880 RIO SAN DIEGO DRIVE  
SUITE 800  
City-State-Zip: SAN DIEGO CA 92108

Title DIRECTOR  
Name SAMPSON, ROBERT J.  
Address 8880 RIO SAN DIEGO DRIVE  
SUITE 800  
City-State-Zip: SAN DIEGO CA 92108

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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:** JOHN W. BAUER

**SECRETARY**

**04/10/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            PRESIDENT  
Name            SAMPSON, ROBERT  
Address        8880 RIO SAN DIEGO DRIVE  
                 SUITE 800  
City-State-Zip: SAN DIEGO CA 92108