

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 850269

**Entity Name:** AMERICAN PROPERTY INSURANCE COMPANY

**Current Principal Place of Business:**

4 INDUSTRIAL WAY WEST, SUITE 102  
EATONTOWN, NJ 07724

**Current Mailing Address:**

4 INDUSTRIAL WAY WEST, SUITE102  
EATONTOWN, NJ 07724 US

**FEI Number:** 58-1438724

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E. GAINES STREET  
TALLAHASSEE, FL 32399 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 P  
Name GORMAN, JAMES V  
Address 4 INDUSTRIAL WAY WEST, SUITE 102  
City-State-Zip: EATONTOWN NJ 07724

Title P  
Name GORMAN, DOUGLAS C  
Address 4 INDUSTRIAL WAY WEST, SUITE 102  
City-State-Zip: EATONTOWN NJ 07724

Title T  
Name TERET, JASON A  
Address 4 INDUSTRIAL WAY WEST, SUITE 102  
City-State-Zip: EATONTOWN NJ 07724

Title CFO  
Name HEID, MARK ANDREW  
Address 4 INDUSTRIAL WAY WEST, SUITE 102  
City-State-Zip: EATONTOWN NJ 07724

*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:** MARK A HEID

CFO

06/28/2018

Electronic Signature of Signing Officer/Director Detail

Date