Entity Name: PAN-AMERICAN ASSURANCE COMPANY

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

## Current Principal Place of Business:

601 POYDRAS STREET NEW ORLEANS, LA 70130

**DOCUMENT# 850451** 

### **Current Mailing Address:**

601 POYDRAS STREET 10TH FLOOR NEW ORLEANS, LA 70130 US

# FEI Number: 72-0917222

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

CHIEF FINANCIAL OFFICER 200 E.GAINES ST. TALLAHASSEE, FL 32301 US FILED Feb 19, 2024 Secretary of State 9385168479CC

Certificate of Status Desired: No

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 :

Officer/Director Detail :			
Title	DIRECTOR; CHAIRMAN OF THE BOARD & CEO	Title	DIRECTOR, VP, CORPORATE ACTUARY
Name	PARKER, BRUCE	Name	ENGERISER, PAUL T.
Address	121 ALHAMBRA PLAZA	Address	601 POYDRAS STREET
City-State-Zip:	SUITE 1501 CORAL GABLES FL 33134	City-State-Zip:	NEW ORLEANS LA 70130
Title	DIRECTOR; SVP, GENERAL COUNSEL	Title	DIRECTOR; PRESIDENT-FINANCE & INVESTMENTS, CFO
Name	& CORP SECRETARY CORRADA, JOSE C.	Name	FRIEDMAN, STEVEN
Address	601 POYDRAS STREET	Address	601 POYDRAS STREET SUITE 2800
City-State-Zip:	10TH FLOOR NEW ORLEANS LA 70130	City-State-Zip:	NEW ORLEANS LA 70130
Title	VP & TREASURER	Title	DIRECTOR, SVP- CHIEF INVESTMENT OFFICER
Name	DIGGS, TIMOTHY	Name	BAUDOT, LISA N.
Address	601 POYDRAS STREET	Address	601 POYDRAS STREET
City-State-Zip:	NEW ORLEANS LA 70130	City-State-Zip:	NEW ORLEANS LA 70130
Title	DIRECTOR, VP, FINANCIAL REPORTING, CONTROLLER		
Name	MUNOZ, ALVARO		
Address	601 POYDRAS ST		
City-State-Zip:	NEW ORLEANS LA 70130		

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: JOSE C. CORRADA

SECRETARY

02/19/2024

Date

Electronic Signature of Signing Officer/Director Detail

Date