#### 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0000001842

Entity Name: MESA UNDERWRITERS SPECIALTY INSURANCE COMPANY

FILED
Apr 16, 2014
Secretary of State
CC4218796223

# **Current Principal Place of Business:**

6263 N. SCOTTSDALE ROAD SUITE 300 SCOTTSDALE, AZ 85250

### **Current Mailing Address:**

40 WANTAGE AVE

BRANCHVILLE, NJ 07890

FEI Number: 75-1629914 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

CHIEF FINANICAL OFFICER 200 E. GAINES ST. 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 CEOP Title CFO

Name NENABER, RICHARD R Name WILSON, SCOTT A

Address 6263 N. SCOTTSDALE ROAD Address 6263 N. SCOTTSDALE ROAD

City-State-Zip: SCOTTSDALE AZ 85250 City-State-Zip: SCOTTSDALE AZ 85250

Title EVP Title SVPT

Name LANZA, MICHAEL H Name DIBERARDINO, JENNIFER W

Address 40 WANTAGE AVE. Address 40 WANTAGE AVE.

City-State-Zip: BRANCHVILLE NJ 07890 City-State-Zip: BRANCHVILLE NJ 07890

Title SVPC Title VPM

Name SWEENEY, SUSAN B Name KARR, ROBERT W

Address 40 WANTAGE AVENUE Address 6263 N. SCOTTSDALE RD, SUITE 300

City-State-Zip: BRANCHVILLE NJ 07890 City-State-Zip: SCOTTSDALE AZ 85250

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: MICHAEL H. LANZA

Electronic Signature of Signing Officer/Director Detail

**EVP** 

04/16/2014