## **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000003227

**Entity Name: ARCH EXCESS & SURPLUS INSURANCE COMPANY** 

**FILED** Jan 13, 2020 **Secretary of State** 8839353303CC

## **Current Principal Place of Business:**

2345 GRAND BOULEVARD

SUITE 900

KANSAS CITY, MO 64108

## **Current Mailing Address:**

HARBORSIDE 3 210 HUDSON STREET SUITE 300 JERSEY CITY, NJ 07311 US

FEI Number: 06-1521582 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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:

Name

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

PRESIDENT, DIRECTOR Title Title **EVP** 

MENTZ, JOHN P FIRST, BRIAN D Name Name Address HARBORSIDE 3 Address HARBORSIDE 3

> 210 HUDSON STREET SUITE 300 210 HUDSON STREET SUITE 300

JERSEY CITY NJ 07311 JERSEY CITY NJ 07311 City-State-Zip: City-State-Zip:

Title AVP, AS Title TD

GILLIGAN, MELISSA B AHERN, THOMAS J Name Name

185 ASYLUM STREET HARBORSIDE 3 Address Address

210 HUDSON STREET SUITE 300 CITYPLACE II, 16TH FLOOR HARTFORD CT 06103 JERSEY CITY NJ 07311 City-State-Zip: City-State-Zip:

Title SECRETARY, DIRECTOR

NAILS, PATRICK D HARBORSIDE 3, 210 HUDSON Address

> STREET SUITE 300

JERSEY CITY NJ 07311 City-State-Zip:

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.

01/13/2020 SIGNATURE: MELISSA GILLIGAN **AVP AS**