## 2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000005146

**Entity Name: PALOMAR INSURANCE CORPORATION** 

Current Principal Place of Business:

4525 EXECUTIVE PARK DRIVE

SUITE 202

MONTGOMERY, AL 36116

**Current Mailing Address:** 

4525 EXECUTIVE PARK DRIVE

SUITE 202

MONTGOMERY, AL 36116 US

FEI Number: 63-0346774 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: MARK WILLIAMS 01/14/2022

Electronic Signature of Registered Agent

Date

FILED Jan 14, 2022

**Secretary of State** 

4150901681CC

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

Name SKIPPER, LEN Name CRAFT, TONY

Address 4525 EXECUTIVE PARK DRIVE SUITE Address 4525 EXECUTIVE PARK DRIVE SUITE

202

**CEO** 

JACKSON AL 36545

City-State-Zip:

City-State-Zip: MONTGOMERY AL 36116 City-State-Zip: MONTGOMERY AL 36116

TitlePRESIDENTTitleVICE-PRESIDENTNameCRAFT, TONYNameSKIPPER, RICHARDAddress4525 EXECUTIVE PARK DRIVE SUITEAddressP. O. DRAWER 1098

202

City-State-Zip: MONTGOMERY AL 36116

 Title
 Title
 TREASURER

 Name
 SKIPPER, DAVID

 Address
 P. O. BOX 1098

 City-State-Zip:
 JACKSON AL 36545

City-State-Zip: JACKSON AL 36545

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.

Electronic Signature of Signing Officer/Director Detail