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 $\quad 01 / 14 / 2022$

## Officer/Director Detail :

| Title | DIRECTOR | Title | DIRECTOR |
| :--- | :--- | :--- | :--- |
| Name | SKIPPER, LEN | Name | CRAFT, TONY |
| Address | 4525 EXECUTIVE PARK DRIVE SUITE <br> 202 | Address | 4525 EXECUTIVE PARK DRIVE SUITE <br> 202 |
| City-State-Zip: | MONTGOMERY AL 36116 | City-State-Zip: | MONTGOMERY AL 36116 |
| Title | PRESIDENT | Title | VICE-PRESIDENT |
| Name | CRAFT, TONY | Name | SKIPPER, RICHARD |
| Address | 4525 EXECUTIVE PARK DRIVE SUITE | Address | P. O. DRAWER 1098 |
| City-State-Zip: | MONTGOMERY AL 36116 | City-State-Zip: | JACKSON AL 36545 |
| Title | SECRETARY | Title | TREASURER |
| Name | SKIPPER, DAVID | Name | SKIPPER, DAVID |
| Address | P. O. BOX 1098 | Address | P. O. BOX 1098 |
| City-State-Zip: | JACKSON AL 36545 | City-State-Zip: | JACKSON AL 36545 |

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[^0]:    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.

