2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03484

Entity Name: FALLS LAKE NATIONAL INSURANCE COMPANY

FILED Mar 31, 2023 **Secretary of State** 1896924959CC

Current Principal Place of Business:

6131 FALLS OF NEUSE RD.

SUITE 306

RALEIGH, NC 27609

Current Mailing Address:

PO BOX 97488

RALEIGH, NC 27624 US

FEI Number: 42-1019055 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

200 E. GAINES ST.

City-State-Zip:

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: NONE NONE 03/31/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

CFO Title CEO, PRESIDENT Title

MCCAFFERTY, TERENCE Name Name MACALEESE, TIMOTHY

Address 6131 FALLS OF NEUSE RD. Address 6131 FALLS OF NEUSE RD. SUITE 306

SUITE 306

RALEIGH NC 27609 City-State-Zip: RALEIGH NC 27609

TREASURER CHAIRPERSON Title Title Name SHULTIS, DANIEL Name DORAN, SARAH

6131 FALLS OF NEUSE RD. Address Address 6131 FALLS OF NEUSE RD.

> SUITE 306 SUITE 306

RALEIGH NC 27609 RALEIGH NC 27609 City-State-Zip: City-State-Zip:

Title **SECRETARY** Title ASST. SECRETARY JEFFRESS, BENSON LILAND, ERIC Name Name

Address 6131 FALLS OF NEUSE RD. Address 6131 FALLS OF NEUSE RD.

> SUITE 306 SUITE 306

RALEIGH NC 27609 RALEIGH NC 27609 City-State-Zip: 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.

SIGNATURE: TERENCE MCCAFFERTY

PRESIDENT & CEO

03/31/2023