

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000083320

**Entity Name:** PURE INSURANCE COMPANY**Current Principal Place of Business:**800 CORPORATE DRIVE SUITE 420  
FT LAUDERDALE, FL 33334**Current Mailing Address:**44 SOUTH BROADWAY  
301  
WHITE PLAINS, NY 10601**FEI Number:** 26-3109178**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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 DIRECTOR  
Name WILLIAMS, CHRIS  
Address 800 CORPORATE DRIVE SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33334

Title DIRECTOR  
Name SCHELL, MICHAEL J  
Address 800 CORPORATE DRIVE SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33334

Title DIRECTOR  
Name BAINE, J. STEPHEN  
Address 800 CORPORATE DRIVE SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33334

Title DIRECTOR  
Name KOGA, HISANOBU  
Address 800 CORPORATE DRIVE SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33334

Title DIRECTOR  
Name RIVERA, SUSAN  
Address 800 CORPORATE DRIVE SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33334

Title DIRECTOR, PRESIDENT, CEO  
Name BUCHMUELLER, ROSS J  
Address 800 CORPORATE DRIVE SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33334

Title DIRECTOR  
Name YAMAMOTO, KICHIICHIRO  
Address 800 CORPORATE DRIVE SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33334

Title TREASURER/EVP/CFO  
Name PARASCHAC, JEFFREY  
Address 800 CORPORATE DRIVE SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33334

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*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:** WILLIAMS, CHRISEMILY MOSCA,  
ATTORNEY-IN-FACT

03/13/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	SVP/SECRETARY
Name	RASLOWSKY , KIRK J.
Address	800 CORPORATE DRIVE SUITE 420
City-State-Zip:	FT LAUDERDALE FL 33334