

2023 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 KITAKA, TOMOYO
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: KIRK J RASLOWSKY**SECRETARY, BY**
THERESA FAGAN,
ATTORNEY-IN-FACT

03/22/2023

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