

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 800568

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: AIG PREMIER INSURANCE COMPANY

## Current Principal Place of Business:

ONE AIG CENTER  
WILMINGTON, DE 19803 US

## New Principal Place of Business:

3 BEAVER VALLEY ROAD  
WILMINGTON, DE 19803 US

## Current Mailing Address:

70 PINE STREET  
30TH FLOOR  
NEW YORK, NY 10270 US

## New Mailing Address:

3 BEAVER VALLEY ROAD  
WILMINGTON, DE 19803 US

FEI Number: 22-1721971

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DESANTIS, ANTHONY J  
Address: ONE AIG CENTER  
City-St-Zip: WILMINGTON, DE 19803 US

Title: EVPD ( ) Delete  
Name: PFEIL, GLENN A  
Address: ONE AIG CENTER  
City-St-Zip: WILMINGTON, DE 19803 US

Title: SVPD ( ) Delete  
Name: CAIN, ESTA L  
Address: ONE AIG CENTER  
City-St-Zip: WILMINGTON, DE 19803 US

Title: S ( ) Delete  
Name: TUCK, ELIZABETH M  
Address: 70 PINE STREET  
City-St-Zip: NEW YORK, NY 10270

Title: SVPD ( ) Delete  
Name: LOUCKS, WILLIAM D JR  
Address: ONE AIG CENTER  
City-St-Zip: WILMINGTON, DE 19803 US

Title: SVPD ( ) Delete  
Name: PORCARI, JAMES A III  
Address: ONE AIG CENTER  
City-St-Zip: WILMINGTON, DE 19803 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: CAIN, ESTA L  
Address: 3 BEAVER VALLEY ROAD  
City-St-Zip: WILMINGTON, NY 19803

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ESTA LEE CAIN

S

04/28/2009

Electronic Signature of Signing Officer or Director

Date