


2004 FOR PROFIT CORPORATION ANNUAL REPORT

| | |
|---|---|
| DOCUMENT # 803353 1. Entity Name BIRMINGHAM FIRE INSURANCE COMPANY OF PENNSYLVANIA |  |
|---|---|

| | |
|--|---|
| Principal Place of Business 1750 CNG TOWER PITTSBURGH, PA 11582 US | Mailing Address 70 PINE STREET ATTN E M TUCK NEW YORK, NY 10270 US |
|--|---|

| | |
|---|---|
| 2. Principal Place of Business 70 Pine Street Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
|---|---|

| | |
|--|--------------------------------|
| City & State New York, NY Zip 10270 Country USA | City & State Zip Country |
|--|--------------------------------|

| | |
|---|--|
| 6. Name and Address of Current Registered Agent THE INSURANCE COMMISSIONER OF FLORIDA THE CAPITOL BUILDING TALLAHASSEE, FL 32301 | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |
|---|--|

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| | | |
|---|--|------------------------------------|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
|---|--|------------------------------------|

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|----------------------------|---|---|---|
| TITLE | CD TIZZIO, THOMAS 175 WATER STREET NEW YORK, NY 10038 | TITLE | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | PD MOOR, KRISTIAN P 175 WATER STREET NEW YORK, NY 10038 | TITLE | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | S TUCK, ELIZABETH M. 70 PINE ST. NEW YORK, NY | TITLE | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | D GREENBERG, MAURICE R 70 PINE ST. NEW YORK, NY | TITLE | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | TVD JACOBSON, ROBERT P 175 WATER STREET NEW YORK, NY 10038 | TITLE | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |
| TITLE | D SMITH, HOWARD 70 PINE ST. NEW YORK, NY | TITLE | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
| NAME | | NAME | |
| STREET ADDRESS | | STREET ADDRESS | |
| CITY-ST-ZIP | | CITY-ST-ZIP | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elizabeth M. Tuck* Date: 4-26-04 (212) 770-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
 APR 29 2004
 APR 29 AM 10:35
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



04262004 Chg-P CR2E034 (10/03)



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 598287 4320171
AUTHORIZATION : Patricia Pizeto
COST LIMIT : \$ 150.00

ORDER DATE : April 28, 2004
ORDER TIME : 10:21 AM
ORDER NO. : 598287-205
CUSTOMER NO: 4320171
CUSTOMER: Bernadette Colon
American International Group,
30th Floor, 70 Pine Street
- Corporate
New York, NY 10270

ANNUAL REPORT FILING

NAME: BIRMINGHAM FIRE INSURANCE
COMPANY OF PENNSYLVANIA

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - Ext. 2914

EXAMINER'S INITIALS:

RECEIVED
04 APR 29 PM 1:12
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA