2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2011
Secretary of State

DOCUMENT# 804418

Entity Name: ASSOCIATED INDEMNITY CORPORATION

Current Principal Place of Business:

777 SAN MARIN DR
% CORP SECRETARY'S OFFICE
NOVATO, CA 94998

New Principal Place of Business:

Current Mailing Address:

777 SAN MARIN DR
% CORP SECRETARY'S OFFICE
NOVATO, CA 94998

New Mailing Address:

FEI Number: 22-1708002 **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

OFFICERS AND DIRECTORS:

Title: AS
Name: WONG, JEANNETTE Y
Address: 777 SAN MARIN DRIVE
City-St-Zip: NOVATO, CA 94998

Title: DCEO
Name: LAROCCO, MICHAEL E
Address: 777 SAN MARIN DRIVE
City-St-Zip: NOVATO, CA 94998

Title: DSVP
Name: NAREY, SALLY B
Address: 777 SAN MARIN DR
City-St-Zip: NOVATO, CA 94998

Title: DVP
Name: JOHNSON, JEFFERY F
Address: 777 SAN MARIN DR.
City-St-Zip: NOVATO, CA 94998

Title: DEVP
Name: PATERSON, JILL E
Address: 777 SAN MARIN DRIVE
City-St-Zip: NOVATO, CA 94998

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: SALLY B. NAREY DSVP 01/06/2011

Electronic Signature of Signing Officer or Director — Date