

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 812643

FILED
Mar 26, 2009
Secretary of State

Entity Name: ATLANTIC INSURANCE COMPANY

Current Principal Place of Business:

4600 FULLER DRIVE
IRVING, TX 750386506 US

New Principal Place of Business:

Current Mailing Address:

ONE TOWER SQUARE
HARTFORD, CT 06183 US

New Mailing Address:

ONE NATIONWIDE PLAZA
ATTN MARK E. HARTMAN, 1-38-03
COLUMBUS, OH 43215 US

FEI Number: 75-6013587

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: DPO () Delete
Name: EDDY, PAUL H
Address: ONE TOWER SQUARE
City-St-Zip: HARTFORD, CT 06183 US

Title: S () Delete
Name: SKJERVEN, WENDY
Address: 385 WASHINGTON STREET
City-St-Zip: ST. PAUL, MN 55102 US

Title: DTO () Delete
Name: TIMPONE, STEPHEN A
Address: 485 LEXINGTON AVENUE, SUITE 400
City-St-Zip: NEW YORK, NY 10017 US

Title: AS () Delete
Name: PRUDHOMME, MARYELLEN
Address: ONE TOWER SQUARE
City-St-Zip: HARTFORD, CT 06183 US

Title: DSVP () Delete
Name: FREY, DANIEL S
Address: ONE TOWER SQUARE
City-St-Zip: HARTFORD, CT 06183 US

Title: DSVP () Delete
Name: RIZZO, ELLEN M
Address: ONE TOWER SQUARE
City-St-Zip: HARTFORD, CT 06183 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: HARPER, PETER W
Address: 8877 N GAINES CENTER DRIVE
City-St-Zip: SCOTTSDALE, AZ 85258 US

Title: DIR (X) Change () Addition
Name: LANDI, CRAIG E
Address: 250 GREENWICH ST., 7 WORLD TRADE CENTER
City-St-Zip: NEW YORK, NY 10007 US

Title: DIR (X) Change () Addition
Name: LEVINE, KENNETH A
Address: 8877 N GAINES CENTER DRIVE
City-St-Zip: SCOTTSDALE, AZ 85258 US

Title: PRES (X) Change () Addition
Name: MILLER, MICHAEL D
Address: 8877 N GAINES CENTER DRIVE
City-St-Zip: SCOTTSDALE, AZ 85258 US

Title: TREA (X) Change () Addition
Name: HARPER, PETER W
Address: 8877 N GAINES CENTER DRIVE
City-St-Zip: SCOTTSDALE, AZ 85258 US

Title: SEC (X) Change () Addition
Name: HORNER, ROBERT W III
Address: ONE NATIONWIDE PLAZA
City-St-Zip: COLUMBUS, OH 43215 US

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: ROBERT W HORNER, III

SEC

03/26/2009

Electronic Signature of Signing Officer or Director

Date