

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 812933

FILED
Apr 28, 2009
Secretary of State

Entity Name: THE CINCINNATI INSURANCE COMPANY

Current Principal Place of Business:

6200 SOUTH GILMORE ROAD
FAIRFIELD, OH 450145141 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 145496
CINCINNATI, OH 452505496 US

New Mailing Address:

FEI Number: 31-0542366 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: CFO () Delete
Name: STECHER, KENNETH
Address: 6106 JOHNSON ROAD
City-St-Zip: CINCINNATI, OH 45047

Title: SVP () Delete
Name: MATHEWS, ERIC N
Address: 5715 BLACKWOLF RUN
City-St-Zip: CINCINNATI, OH 42547

Title: SVP () Delete
Name: PLUM, LARRY
Address: 6262 LAKE SHORE DRIVE
City-St-Zip: MASON, OH 45040

Title: SVP () Delete
Name: TIMMEL, TIMOTHY L
Address: 5572 EAST GALBRAITH RD.
City-St-Zip: CINCINNATI, OH 45231

Title: CEOP () Delete
Name: BENOSKI, JAMES E
Address: 1212 RED ROAN DRIVE
City-St-Zip: LOVELAND, OH 45140

Title: SVP () Delete
Name: SCHERER, J.F.
Address: 8653 HAMPTON BAY PLACE
City-St-Zip: MASON, OH 45040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change () Addition
Name: JOHNSTON, STEVEN J CFO
Address: 390 S. WAYNESVILLE ROAD
City-St-Zip: OREGONIA, OH 45054

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

Title: SVP (X) Change () Addition
Name: JOSEPH, THOMAS A
Address: 70 WEST SHARON AVENUE
City-St-Zip: CINCINNATI, OH 45246

Title: SVP (X) Change () Addition
Name: TIMMEL, TIMOTHY L
Address: ONE ROEBLING WAY #1504
City-St-Zip: COVINGTON, KY 41011

Title: CEOP (X) Change () Addition
Name: STECHER, KENNETH W
Address: 6106 JOHNSON ROAD
City-St-Zip: CINCINNATI, OH 45247

Title: EVP (X) Change () Addition
Name: SCHERER, JACOB F
Address: 8653 HAMPTON BAY PLACE
City-St-Zip: MASON, OH 45040

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: STEVEN J JOHNSTON

CFO

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date