## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#837141** 

Entity Name: EVEREST REINSURANCE COMPANY

FILED Apr 03, 2009 Secretary of State

Current Principal Place of Business:				New Princ	New Principal Place of Business:		
	NSVILLE RD ORNER, NJ 07	938	US				
Current Mailing Address:				New Maili	New Mailing Address:		
	NSVILLE RD ORNER, NJ 07	938	US	PO BOX 83 LIBERTY C	30 CORNER, NJ 079380830		
FEI Number:	22-2005057	FEI Num	ber Applied For() FEI	Number Not Appl	licable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 US							
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:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DV () De CALLAHAN, SCOT 477 MARTINSVILL LIBERTY CORNER	TT P LE RD	938	Title: Name: Address: City-St-Zip:	DEVP (X) Change ( ) Addition CALLAHAN, SCOTT P 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938		
Title: Name: Address: City-St-Zip:	C () De TARANTO, JOSEF 477 MARTINSVILL LIBERTY CORNER	PH V LE RD	938	Title: Name: Address: City-St-Zip:	C (X) Change ( ) Addition TARANTO, JOSEPH V 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938		
Title: Name: Address: City-St-Zip:	DSVP () DO MUKHERJEE, SAN 477 MARTINSVILL LIBERTY CORNER	NJOY LE RD	938	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DP () De GALLAGHER, THO 477 MARTINSVILL LIBERTY CORNER	DMAS J LE RD	938	Title: Name: Address: City-St-Zip:	DP (X) Change ( ) Addition GALLAGHER, THOMAS J 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938		
Title: Name: Address: City-St-Zip:	DEVP () DO MESTMAN, STEVE 477 MARTINSVILL LIBERTY CORNER	EN A LE RD	938	Title: Name: Address: City-St-Zip:	DSVP (X) Change ( ) Addition CAPICCHIONI, ROBERT E 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938		
Title: Name: Address: City-St-Zip:	DEVP () DO SCHMIDT, DAVID 477 MARTINSVILL LIBERTY CORNER	E _E RD	938	Title: Name: Address: City-St-Zip:	() Change () Addition		

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: SANJOY MUKHERJEE SECY 04/03/2009