2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003514

Entity Name: ESSENTIA INSURANCE COMPANY

FILED Feb 04, 2010 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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40 WEST OFFICE BUILDING 14567 NORTH OUTER 40 CHESTERFIELD, MO 63017

Current Mailing Address: New Mailing Address:

ONE BEACON LANE CANTON, MA 02021

FEI Number: 04-2672903 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES STREET TALLAHASSEE, FL 32399 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:

Title: PD

Name: MILLER, TIMOTHY M Address: ONE BEACON LANE City-St-Zip: CANTON, MA 02021

Title: VD

Name: ARCHIMEDES, ALEX C Address: ONE BEACON LANE City-St-Zip: CANTON, MA 02021

Title: VD

Name: CARNASE, ANDREW C Address: ONE BEACON LANE City-St-Zip: CANTON, MA 02021

Title: VD

Name: HENDERSHOTT, DANA P Address: ONE BEACON LANE City-St-Zip: CANTON, MA 02021

Title:

Name: SMITH, DENNIS R Address: ONE BEACON LANE City-St-Zip: CANTON, MA 02021

Title:

Name: MILLS, TODD C
Address: ONE BEACON LANE
City-St-Zip: CANTON, MA 02021

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: DENNIS R. SMITH S 02/04/2010