2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000658

Entity Name: SEAWORTHY INSURANCE COMPANY

FILED Apr 10, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

147 OLD SOLOMON'S ISLAND RD.

SUITE 513

ANNAPOLIS, MD 21401

Current Mailing Address: New Mailing Address:

880 S PICKETT STREET
ALEXANDRIA, VA 22304
3024 HARNEY STREET
OMAHA, NE 681313580

FEI Number: 52-1658500 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:

FLETCHER, VIRGINIA L 6255 LAKE GRAY BLVD., SUITE 4 JACKSONVILLE, FL 32244 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

OFFICERS AND DIRECTORS:

Title: CHRM

Name: OAKERSON, WILLIAM M Address: 880 S. PICKETT ST. City-St-Zip: ALEXANDRIA, VA 22304

Title: F

Name: HOLLER, JAMES B Address: 880 S. PICKETT ST. City-St-Zip: ALEXANDRIA, VA 22304

Title: VF

Name: ROBERTSON, CARROLL C Address: 880 S. PICKETT ST. City-St-Zip: ALEXANDRIA, VA 22304

Title:

 Name:
 MATEY, EVELYN A

 Address:
 880 S. PICKETT ST.

 City-St-Zip:
 ALEXANDRIA, VA 22304

Title:

Name: POMPONI, FELIX J Address: 880 S. PICKETT ST. City-St-Zip: ALEXANDRIA, VA 22304

Title: AVP

Name: RATHBUN, RODNEY L Address: 3024 HARNEY STREET City-St-Zip: OMAHA, NE 68131

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: RODNEY L RATHBUN AVP 04/10/2012