

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005405

FILED  
Apr 13, 2011  
Secretary of State

**Entity Name:** AMERICAN CONTRACTORS INDEMNITY COMPANY

**Current Principal Place of Business:**

601 S. FIGUEROA ST.  
SUITE 1600  
LOS ANGELES, CA 90017 US

**New Principal Place of Business:**

**Current Mailing Address:**

13403 NORTHWEST FREEWAY  
HOUSTON, TX 77040 US

**New Mailing Address:**

**FEI Number:** 95-4290651

**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 32399 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PESSIN, ADAM S  
Address: 601 S. FIGUEROA ST., STE 1600  
City-St-Zip: LOS ANGELES, CA 90017

Title: VD  
Name: WHAMOND, W. TOBIN  
Address: 13403 NORTHWEST FREEWAY  
City-St-Zip: HOUSTON, TX 77040

Title: VS  
Name: KIM, JEANNIE J  
Address: 601 S. FIGUEROA ST., STE 1600  
City-St-Zip: LOS ANGELES, CA 90017

Title: VT  
Name: LEE, JONATHAN  
Address: 13403 NORTHWEST FREEWAY  
City-St-Zip: HOUSTON, TX 77040

Title: ASD  
Name: RINICELLA, RANDY D  
Address: 13403 NORTHWEST FREEWAY  
City-St-Zip: HOUSTON, TX 77040

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: RANDY D. RINICELLA

AS

04/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date