2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002001

Entity Name: ACE CAPITAL TITLE REINSURANCE COMPANY

FILED Apr 27, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1133 AVE. OF THE AMERICAS NEW YORK, NY 10036 US

Current Mailing Address: New Mailing Address:

436 WALNUT ST.

PHILADELPHIA, PA 19106 US

FEI Number: 06-1434264 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 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.

III the State of Flori

SIGNATURE: Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP

Name: MERNA, MATTHEW G

Address: 10 EXCHANGE PLACE, 9TH FLOOR City-St-Zip: JERSEY CITY, NJ 07302 US

Title: DVPS

Name: SANPIETRO, SCOTT J

Address: 10 EXCHANGE PLACE, 9TH FLOOR City-St-Zip: JERSEY CITY, NJ 07302 US

Title: DVP

Name: KRAMER, GARY E Address: 436 WALNUT ST.

City-St-Zip: PHILADELPHIA, PA 19106 US

Title: AS

Name: GIGANTI, CARMINE A Address: 436 WALNUT ST

City-St-Zip: PHILADELPHIA, PA 19106 US

Title: VF

 Name:
 HESSING, ILANA G

 Address:
 436 WALNUT STREET

 City-St-Zip:
 PHILADELPHIA, PA 19106 US

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: CARMINE A. GIGANTI AS 04/27/2012