2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2009
Secretary of State

DOCUMENT# P05621

Entity Name: QBE INSURANCE CORPORATION

Current Principal Place of Business:

88 PINE STREET (16TH FLOOR)
WALL STREET PLAZA
NEW YORK, NY 10005

New Principal Place of Business:

88 PINE STREET (4TH FLOOR)
WALL STREET PLAZA
NEW YORK, NY 10005 US

Current Mailing Address:

WALL STREET PLAZA
88 PINE STREET-16TH FL
NEW YORK, NY 100051801

New Mailing Address:

WALL STREET PLAZA
88 PINE STREET-4TH FL
NEW YORK, NY 100051801 US

FEI Number: 22-2311816 **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 323990000 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CFOT ( ) Delete
Name: FISH, CHRISTOPHER C
Address: WALL STREET PLAZA-88 PINE ST. 16TH FL.
City-St-Zip: NEW YORK, NY 100051801

Title: CS ( ) Delete
Name: MALONEY, PETER
Address: WALL STREET PLAZA-88 PINE ST. 16TH FL.
City-St-Zip: NEW YORK, NY 100051801

Title: SVPD ( ) Delete
Name: DAVEY, IAN G
Address: WALL STREET PLAZA-88 PINE ST. 16TH FL.
City-St-Zip: NEW YORK, NY 100051801 IR

Title: PCFO ( ) Delete
Name: RIVERA, SUSAN
Address: 88 PINE ST 16TH FL
City-St-Zip: NEW YORK, NY 10005

Title: D (X) Delete
Name: O'HALLORAN, FRANCIS, MICHAEL
Address: 82 PITT STREET
City-St-Zip: SYDNEY, AUSTRALIA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition
Name: CHRISTOPHER,
Address: 88 PINE STREET (4TH FLOOR)
City-St-Zip: NEW YORK, NY 10005 US

Title: S (X) Change ( ) Addition
Name: PETER,
Address: 88 PINE STREET (4TH FLOOR)
City-St-Zip: NEW YORK, NY 10005 US

Title: P (X) Change ( ) Addition
Name: SUSAN,
Address: 88 PINE STREET (4TH FLOOR)
City-St-Zip: NEW YORK, NY 10005 US

Title: C (X) Change ( ) Addition
Name: FRANCIS,
Address: 82 PITT STREET
City-St-Zip: SYDNEY, NA AU

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: PETER MALONEY S 03/30/2009

Electronic Signature of Signing Officer or Director — Date