2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40325

Apr 03, 2012 Secretary of State

Entity Name: UNITED FINANCIAL CASUALTY COMPANY

Current Principal Place of Business: New Principal Place of Business:

6300 WILSON MILLS ROAD MAYFIELD VILLAGE, OH 44143

Current Mailing Address: New Mailing Address:

US

6300 WILSON MILLS ROAD MAYFIELD VILLAGE, OH 44143 US

FEI Number: 36-3298008 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.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

BISSLER, MICHAEL W PD Name: 6300 WILSON MILLS ROAD Address: City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

Title:

Name: CORWIN, PATRICIA M SEC 6300 WILSON MILLS ROAD Address: MAYFIELD VILLAGE, OH 44143 US City-St-Zip:

Title: TD

BARBAGALLO, JOHN A TD Name: 6300 WILSON MILLS ROAD Address: City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

Title: VPD

BERNER, PATRICIA O VPD Name: Address: 6300 WILSON MILLS ROAD City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

Title:

Name: KAMPF, WILLIAM R VPD Address: 6300 WILSON MILLS ROAD City-St-Zip: MAYFIELD VILLAGE, OH 44143 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: BRITNI WIGE POA 04/03/2012