

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06852

FILED
Oct 26, 2005
Secretary of State

Entity Name: AIG NATIONAL INSURANCE COMPANY, INC.

Current Principal Place of Business:

70 PINE STREET
30TH FLOOR
NEW YORK, NY 10270 US

New Principal Place of Business:

Current Mailing Address:

70 PINE STREET
30TH FLOOR
NEW YORK, NY 10270 US

New Mailing Address:

FEI Number: 13-2755310 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INSURANCE COMMISSIONER
CAPITOL BUILDING
TALLAHASSEE, FL 32301 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: INSURANCE COMMISSIONER

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PAVIA, ANTHONY
Address: 4501 NORTH POINT PARKWAY
City-St-Zip: ALPHARETTA, GA 30021

Title: T () Delete
Name: BENSINGER, STEVEN J
Address: 70 PINE STREET
City-St-Zip: NEW YORK, NY 10270 US

Title: S () Delete
Name: TUCK, ELIZABETH M.,
Address: 70 PINE STREET
City-St-Zip: NEW YORK, NY 10270 US

Title: D () Delete
Name: MATTHEWS, EDWARD E
Address: 70 PINE STREET
City-St-Zip: NEW YORK, NY 10270 US

Title: D () Delete
Name: TIZZIO, THOMAS R
Address: 70 PINE STREET
City-St-Zip: NEW YORK, NY 10270 US

Title: CD () Delete
Name: SANDLER, ROBERT M
Address: 70 PINE STREET
City-St-Zip: NEW YORK, NY 10270 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PAVIA, ANTHONY
Address: 13010 MORRIS ROAD
City-St-Zip: ALPHARETTA, GA 30004

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

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

Title: D (X) Change () Addition
Name: HANSEN, JACOB E
Address: 3 BEAVER VALLY ROAD
City-St-Zip: WILMINGTON, DE 19803 US

Title: D (X) Change () Addition
Name: PATRIKIS, ERNEST T
Address: 70 PINE STREET
City-St-Zip: NEW YORK, NY 10270 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELIZABETH M. TUCK

S

10/26/2005

Electronic Signature of Signing Officer or Director

Date