2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P00143

Entity Name: NORTH AMERICAN SPECIALTY INSURANCE COMPANY INCORPORATED

Current Principal Place of Business:

650 ELM STREET, 6TH FLOOR
MANCHESTER, NH 031012524 US

New Principal Place of Business:

Current Mailing Address:

650 ELM STREET, 6TH FLOOR
MANCHESTER, NH 031012524 US

New Mailing Address:

FEI Number: 02-0311919 **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:	PD	( ) Delete
Name:	SOLITRO, ROBERT M	
Address:	75 MCLANE LANE	
City-St-Zip:	MANCHESTER, NH 03104	
Title:	TVP	( ) Delete
Name:	STYS, EDWARD D	
Address:	21 WIMBLETON HEIGHTS	
City-St-Zip:	HOOKSETT, NH 03106	
Title:	S	( ) Delete
Name:	HARRIGAN, PATRICIA	
Address:	175 KING ST.	
City-St-Zip:	ARMONK, NY 10504	
Title:	VP	( ) Delete
Name:	WOODHULL, MAURY T	
Address:	59 POWDER HILL RD.	
City-St-Zip:	BEDFORD, NH 03110	
Title:	V	( ) Delete
Name:	GIUSEPPE, FRANCO L	
Address:	11 BILLS WAY	
City-St-Zip:	BEDFORD, NH 03110	
Title:	V	(X) Delete
Name:	OPINANTE, PETER EDWARD	
Address:	15 BEAR MOUNTAIN ROAD	
City-St-Zip:	NEW FAIRFIELD, CT 06812	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	THOMPSON, ANN E	
Address:	6845 BROOKSIDE	
City-St-Zip:	KANSAS CITY, MO 64113	
Title:	V	(X) Change ( ) Addition
Name:	WOODHULL, MAURY T	
Address:	59 POWDER HILL RD.	
City-St-Zip:	BEDFORD, NH 03110	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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: EDWARD D. STYS TV 04/27/2007
Electronic Signature of Signing Officer or Director — Date