2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2008
Secretary of State

DOCUMENT# 811284

Entity Name: ONEBEACON INSURANCE COMPANY

Current Principal Place of Business:

1500 SPRING GARDEN ST
STE 500
PHILADELPHIA, PA 19130

New Principal Place of Business:

Current Mailing Address:

ONE BEACON STREET
CANTON, MA 02021 US

New Mailing Address:

ONE BEACON LANE
CANTON, MA 02021 US

FEI Number: 23-1502700 **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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: SMITH, DENNIS R
Address: ONE BEACON STREET
City-St-Zip: CANTON, MA 02021

Title: DCP ( ) Delete
Name: MILLER, T M
Address: ONE BEACON
City-St-Zip: CANTON, MA 02021

Title: VD ( ) Delete
Name: ARCHIMEDES, ALEX C
Address: ONE BEACON ST
City-St-Zip: CANTON, MA 02021

Title: DV ( ) Delete
Name: MCDONOUGH, PAUL H
Address: ONE BEACON ST
City-St-Zip: CANTON, MA 02021

Title: VD ( ) Delete
Name: CARNASE, ANDREW C
Address: ONE CONSTITUTION WY
City-St-Zip: CANTON, MA 02021

Title: DV ( ) Delete
Name: POOLE, BRIAN D
Address: ONE BEACON ST
City-St-Zip: CANTON, MA 02021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: SMITH, DENNIS R
Address: ONE BEACON LANE
City-St-Zip: CANTON, MA 02021

Title: DCP (X) Change ( ) Addition
Name: MILLER, TIMOTHY M
Address: ONE BEACON LANE
City-St-Zip: CANTON, MA 02021

Title: VD (X) Change ( ) Addition
Name: ARCHIMEDES, ALEX C
Address: ONE BEACON LANE
City-St-Zip: CANTON, MA 02021

Title: DV (X) Change ( ) Addition
Name: MCDONOUGH, PAUL H
Address: ONE BEACON LANE
City-St-Zip: CANTON, MA 02021

Title: VD (X) Change ( ) Addition
Name: CARNASE, ANDREW C
Address: ONE BEACON LANE
City-St-Zip: CANTON, MA 02021

Title: DV (X) Change ( ) Addition
Name: POOLE, BRIAN D
Address: ONE BEACON LANE
City-St-Zip: CANTON, MA 02021

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: DENNIS R. SMITH S 07/08/2008

Electronic Signature of Signing Officer or Director Date