

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 857724

**FILED**  
**Jul 21, 2011**  
**Secretary of State**

**Entity Name:** CHARTIS CASUALTY COMPANY

**Current Principal Place of Business:**

175 WATER STREET  
NEW YORK, NY 10038 US

**New Principal Place of Business:**

**Current Mailing Address:**

175 WATER STREET  
18TH FLOOR  
NEW YORK, NY 10038

**New Mailing Address:**

**FEI Number:** 02-6008643      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

INSURANCE COMMISSIONER  
CAPITOL BLDG  
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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DEVP  
**Name:** DOYLE, JOHN Q  
**Address:** 175 WATER STREET  
**City-St-Zip:** NEW YORK, NY 10038 US

**Title:** S  
**Name:** BUTKOVIC, DENIS  
**Address:** 175 WATER STREET  
**City-St-Zip:** NEW YORK, NY 10038 US

**Title:** SVP  
**Name:** MUOIO, GARY  
**Address:** 175 WATER STREET  
**City-St-Zip:** NEW YORK, NY 10270 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: DENIS BUTKOVIC

S

07/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date