

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853479

FILED
Jun 11, 2012
Secretary of State

Entity Name: AMERICAN ZURICH INSURANCE COMPANY

Current Principal Place of Business:

1400 AMERICAN LANE
CORPORATE LAW
SCHAUMBURG, IL 60196

New Principal Place of Business:

Current Mailing Address:

1400 AMERICAN LANE
CORPORATE LAW
SCHAUMBURG, IL 60196

New Mailing Address:

FEI Number: 36-3141762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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

OFFICERS AND DIRECTORS:

Title: DCEO
Name: FOLEY, MICHAEL
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: DSEC
Name: KERRIGAN, DENNIS F
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: PD
Name: MUELLER, NANCY
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: DIR
Name: KEARNS, RICHARD
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: EVP
Name: MALLIE, TINA
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: TREA
Name: PAUL, BARRY S
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

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: DENNIS KERRIGAN

SEC

06/11/2012

Electronic Signature of Signing Officer or Director

Date