2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036008

Entity Name: EDISON INSURANCE COMPANY

Current Principal Place of Business:

903 NW 65TH ST SUITE 200 BOCA RATON, FL 33487

Current Mailing Address:

903 NW 65TH ST SUITE 200 BOCA RATON, FL 33487

FEI Number: 20-2742404

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER PROCESS SECTION 200 E. GAINES ST. TALLAHASSEE, FL 32399 US

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

Officer/Director Detail :

	Title	D	Title	D
	Name	DESJADON, ROGER	Name	ADKINS, PAUL
	Address	6 TERHUNE CT	Address	18743 LONG LAKE DR
	City-State-Zip:	FRANKLIN PARK NJ 08823	City-State-Zip:	BOCA RATON FL 33496
	Title	D	Title	D
	Name	GIULIANTI, STACEY	Name	LATTANZIO, FRANCIS
	Address	3325 WATER OAK ST	Address	85 FARMCLIFF DR
	City-State-Zip:	FORT LAUDERDALE FL 33312	City-State-Zip:	GLASTONBURY CT 06033
	Title	D	Title	D
	Name	CANTOR, GARY	Name	STRAUCH, CLINT
	Address	7 OCEAN HARBOUR CIRCLE	Address	3317 NE 30 AVE
	City-State-Zip:	OCEAN RIDGE FL 33435	City-State-Zip:	LIGHTHOUSE POINT FL 33064

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.

CORP SEC

SIGNATURE: STACEY A GIULIANTI

Electronic Signature of Signing Officer/Director Detail

FILED Jan 28, 2013 Secretary of State CC0274978583

Certificate of Status Desired: No

Date