

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 805829

**FILED**  
**Apr 17, 2014**  
**Secretary of State**  
**CC8221757412**

**Entity Name:** VALLEY FORGE INSURANCE COMPANY

**Current Principal Place of Business:**

333 S. WABASH AVE.  
CHICAGO, IL 60604

**Current Mailing Address:**

333 S. WABASH AVE. - 43RD FLOOR  
CHICAGO, IL 60604

**FEI Number:** 23-1620527

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399-0000 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

Date

**Officer/Director Detail :**

Title           EVP DIRECTOR  
Name           PONTARELLI, THOMAS  
Address        333 S WABASH AVE  
City-State-Zip: CHICAGO IL 60604

Title           CFO DIRECTOR  
Name           MENSE, D. CRAIG  
Address        333 S WABASH AVE  
City-State-Zip: CHICAGO IL 60604

Title           CEO DIRECTOR  
Name           MOTAMED, THOMAS F  
Address        333 S WABASH AVE  
City-State-Zip: CHICAGO IL 60604

Title           PRESIDENT  
Name           MIRALLES, JR., ALBERT J JR.  
Address        333 S WABASH AVE  
City-State-Zip: CHICAGO IL 60604

Title           SECRETARY & DIRECTOR  
Name           KANTOR, JONATHAN D  
Address        333 S WABASH AVE  
City-State-Zip: CHICAGO IL 60604

Title           SVP, DIRECTOR  
Name           DARCY, STATHY  
Address        333 S WABASH AVE  
City-State-Zip: CHICAGO IL 60604

Title           EVP  
Name           FAY, GEORGE R.  
Address        333 S. WABASH AVE.  
City-State-Zip: CHICAGO IL 60604

Title           EVP, DIRECTOR  
Name           HAEFNER, LARRY A.  
Address        333 S. WABASH AVE.  
City-State-Zip: CHICAGO IL 60604

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*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:** STATHY DARCY

**SENIOR VICE PRESIDENT 04/17/2014**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            PRESIDENT  
Name            LINDEMANN, ROBERT A  
Address         333 S. WABASH AVE.  
City-State-Zip: CHICAGO IL 60604

Title            PRESIDENT  
Name            SZERLONG, TIMOTHY J.  
Address         333 S. WABASH AVE.  
City-State-Zip: CHICAGO IL 60604

Title            DIRECTOR  
Name            BOYSEN, LAWRENCE J.  
Address         333 S. WABASH AVE.  
City-State-Zip: CHICAGO IL 60604

Title            PRESIDENT  
Name            HERMAN, MARK I.  
Address         333 S. WABASH AVE.  
City-State-Zip: CHICAGO IL 60604