## 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 811381** 

**Entity Name: ALLEGHENY CASUALTY COMPANY** 

**Current Principal Place of Business:** 

2570 BOULEVARD OF THE GENERALS

NORRISTOWN, PA 19403

**Current Mailing Address:** 

ONE NEWARK CENTER 20TH FLOOR NEWARK, NJ 07102

FEI Number: 25-0315340

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 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

FILED Feb 16, 2013

**Secretary of State** 

CC0074969540

Certificate of Status Desired: No.

Officer/Director Detail:

Title S Title VP

Name RICCORDELLA, VINCENT M Name NAIRIN, BRIAN N

Address ONE NEWARK CENTER, 20TH FL Address ONE NEWARK CENTER 19TH FLOOR

City-State-Zip: NEWARK NJ 07102 City-State-Zip: NEWARK NJ 07102

Title P Title D

Name MINSTER, ROBERT WPRESIDE Name WATSON, JERRY W

Address ONE NEWARK CENTER Address ONE NEWARK CENTER 19TH FLOOR

City-State-Zip: NEWARK NJ 07102 City-State-Zip: NEWARK NJ 07102

Title VP Title T

Name MITTERHOFF, FRANCIS L Name COSTA, MARIA D

Address ONE NEWARK CENTER 20TH FLOOR Address ONE NEWARK CENTER, 20TH FL

City-State-Zip: NEWARK NJ 07102 City-State-Zip: NEWARK NJ 07102

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: VINCENT MARK RICCORDELLA

**SECRETARY** 

02/16/2013