

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836021

FILED
Mar 20, 2015
Secretary of State
CC4468799337

Entity Name: TRANSAMERICA CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

4333 EDGEWOOD RD NE
CEDAR RAPIDS, IA 52499

Current Mailing Address:

4333 EDGEWOOD RD NE
CEDAR RAPIDS, IA 52499 US

FEI Number: 31-4423946

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DP
Name WALKER, EDWARD H III
Address 100 LIGHT STREET, FLOOR B1
City-State-Zip: BALTIMORE MD 21202

Title D& SVP, CNSL
Name ORLANDI, JAY
Address 4333 EDGEWOOD RD N.E.
City-State-Zip: CEDAR RAPIDS IA 52499

Title D, SVP & S
Name EUBANKS, MICHAEL A
Address 100 LIGHT STREET, FLOOR B1
City-State-Zip: BALTIMORE MD 21202

Title VP
Name WILSON, MICHAEL L
Address 100 LIGHT STREET, FLOOR B1
City-State-Zip: BALTIMORE MD 21202

Title D, EVP & COO
Name CLANCY, BRENDA K
Address 4333 EDGEWOOD RD N.E.
City-State-Zip: CEDAR RAPIDS IA 52499

Title VP
Name WRIGHT, KEITH
Address 2700 WEST PLANO PARKWAY
City-State-Zip: PLANO TX 75075

Title D & SVP
Name MANGUM, G. DOUGLAS JR.
Address 300 EAGLEVIEW BLVD
City-State-Zip: EXTON PA 19341

Title TREASURER, SVP, CFO
Name KATWIJK, C. MICHIEL VAN
Address 4333 EDGEWOOD RD NE
City-State-Zip: CEDAR RAPIDS IA 52499

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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: JAY ORLANDI

SENIOR VICE PRESIDENT 03/20/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D, SVP
Name SMITH, BRIAN A
Address 300 EAGLEVIEW BLVD
City-State-Zip: EXTON PA 19341

Title DIRECTOR, VP
Name MCCONNELL, MARTHA A
Address 100 LIGHT STREET
FLOOR B1
City-State-Zip: BALTIMORE MD 21202