

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 846967

**Entity Name:** LIBERTY INSURANCE UNDERWRITERS INC.**Current Principal Place of Business:**175 BERKELEY ST.  
BOSTON, MA 02116**Current Mailing Address:**175 BERKELEY STREET  
10-B  
BOSTON, MA 02116 US**FEI Number:** 22-2227331**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	TREASURER
Name	YAHIA, LAURANCE HS
Address	175 BERKELEY ST.
City-State-Zip:	BOSTON MA 02116

Title	CEO, P, D
Name	PEIRCE, CHRISTOPHER L
Address	175 BERKELEY ST.
City-State-Zip:	BOSTON MA 02116

Title	SEC
Name	LEGG, DEXTER R
Address	175 BERKELEY ST.
City-State-Zip:	BOSTON MA 02116

Title	VPT
Name	YAHIA, LAURANCE H
Address	175 BERKELEY ST.
City-State-Zip:	BOSTON MA 02116

Title	ASEC
Name	KELLEY, KRISTIN L
Address	175 BERKELEY ST.
City-State-Zip:	BOSTON MA 02116

*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:** KRISTIN L. KELLEY**ASST. SECRETARY****04/29/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date