

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853479

Entity Name: AMERICAN ZURICH INSURANCE COMPANY**Current Principal Place of Business:**1299 ZURICH WAY
SCHAUMBURG, IL 60196**Current Mailing Address:**1299 ZURICH WAY
REGULATORY SERVICES
SCHAUMBURG, IL 60196 US**FEI Number:** 36-3141762**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	CEO, DIRECTOR
Name	FOLEY, MICHAEL
Address	1299 ZURICH WAY
City-State-Zip:	SCHAUMBURG IL 60196

Title	SECRETARY, DIRECTOR
Name	KERRIGAN, DENNIS F
Address	1299 ZURICH WAY
City-State-Zip:	SCHAUMBURG IL 60196

Title	PRESIDENT, DIRECTOR
Name	FUNDUM, CRAIG
Address	1299 ZURICH WAY
City-State-Zip:	SCHAUMBURG IL 60196

Title	TREASURER
Name	BURNE, RICHARD
Address	1299 ZURICH WAY
City-State-Zip:	SCHAUMBURG IL 60196

Title	CFO, DIRECTOR
Name	HOCH, DALYNN
Address	1299 ZURICH WAY
City-State-Zip:	SCHAUMBURG IL 60196

Title	EVP, DIRECTOR
Name	HATCH, STEVE
Address	1299 ZURICH WAY
City-State-Zip:	SCHAUMBURG IL 60196

Title	EVP, DIRECTOR
Name	SALVATORE, BRYAN J
Address	ONE LIBERTY PLAZA 165 BROADWAY 32ND FLOOR
City-State-Zip:	NEW YORK NY 10006

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: DENNIS F. KERRIGAN**SECRETARY****03/27/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date