

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 29, 2016
Secretary of State
CC8507147430

Entity Name: AXIS SPECIALTY INSURANCE COMPANY

Current Principal Place of Business:

ONE STATE STREET
SUITE 1700
HARTFORD, CT 06103

Current Mailing Address:

11680 GREAT OAKS WAY
SUITE 500
ALPHARETTA, GA 30022

FEI Number: 56-2295242

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL 32301 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 PCEO, DIRECTOR
Name MANER, CARLTON W
Address 11680 GREAT OAKS WAY
STE. 500
City-State-Zip: ALPHARETTA GA 30022

Title SVP, TREASURER
Name MCCARTY, MARTIN J.
Address 11680 GREAT OAKS WAY STE 500
City-State-Zip: ALPHARETTA GA 30022

Title SGCD
Name WEISSERT, ANDREW M
Address 11680 GREAT OAKS WAY STE 500
City-State-Zip: ALPHARETTA GA 30022

Title SVPD
Name VOGT, PETER J
Address 1 UNIVERSITY SQUARE DRIVE
STE. 200
City-State-Zip: PRINCETON NJ 08540

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: ANDREW M. WEISSERT

SVP, GENERAL COUNSEL 03/29/2016
& SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date