

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000004580

Entity Name: AMERIHEALTH CASUALTY INSURANCE COMPANY**Current Principal Place of Business:**1209 ORANGE ST
WILMINGTON, DE 19801**Current Mailing Address:**1700 MARKET STREET
SUITE 700
PHILADELPHIA, PA 19103 US**FEI Number: 06-1505051****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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 PRESIDENT, CEO, AND DIRECTOR
Name LISKAY, DONALD J
Address 11 STANWIX ST, SUITE 725
City-State-Zip: PITTSBURGH PA 15222

Title SECRETARY
Name TALIAFERRO, LILTON R JR
Address 1901 MARKET ST
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR
Name CASHMAN, CHRISTOPHER
Address 1901 MARKET ST
City-State-Zip: PHILADELPHIA PA 19103

Title VP - SALES AND UNDERWRITING
Name ADAMS, ROBERT M
Address 1700 MARKET STREET
 SUITE 700
City-State-Zip: PHILADELPHIA PA 19103

Title VP - FINANCE AND ADMINISTRATION
Name CUCINOTTA, DAVID R
Address 1700 MARKET ST, SUITE 700
City-State-Zip: PHILADELPHIA PA 19103

Title EXECUTIVE VICE PRESIDENT, CFO,
 TREASURER, AND DIRECTOR
Name KRIGSTEIN, ALAN
Address 1901 MARKET ST
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR
Name NEESON, RICHARD J
Address 1901 MARKET ST.
City-State-Zip: PHILADELPHIA PA 19103

Title VP AND CHIEF MEDICAL OFFICER
Name DRAGOUN, JENNIFER M DR.
Address 1700 MARKET STREET
 SUITE 700
City-State-Zip: PHILADELPHIA PA 19103

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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: LILTON R. TALIAFERRO, JR.**SECRETARY****04/15/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title VP - SALES AND MARKETING
Name GIVEANS, GLENN R
Address 1700 MARKET STREET
 SUITE 700
City-State-Zip: PHILADELPHIA PA 19103

Title ASSISTANT SECRETARY
Name LEVINS, RICHARD F
Address 1901 MARKET STREET
City-State-Zip: PHILADELPHIA PA 19103

Title VP - OPERATIONS
Name HERZER, LEE J.
Address 1700 MARKET STREET
 SUITE 700
City-State-Zip: PHILADELPHIA PA 19103