

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F96000002861

**Entity Name:** HIGHMARK CASUALTY INSURANCE COMPANY

**FILED**  
**Apr 09, 2013**  
**Secretary of State**  
**CC1578981363**

**Current Principal Place of Business:**

120 FIFTH AVENUE  
P6106  
PITTSBURGH, PA 15222-3099

**Current Mailing Address:**

P.O BOX 535061  
P6106  
PITTSBURGH, PA 15253-5061 US

**FEI Number: 25-1334623**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 32399-0300 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  
Name HOLMBERG, DAVID L  
Address 120 FIFTH AVENUE  
P6106  
City-State-Zip: PITTSBURGH PA 15222-3099

Title P  
Name SULLIVAN, MICHAEL W  
Address 120 FIFTH AVENUE  
P6106  
City-State-Zip: PITTSBURGH PA 15222-3099

Title S  
Name BITTNER, EDWARD A JR.  
Address 120 FIFTH AVENUE  
P6106  
City-State-Zip: PITTSBURGH PA 15222-3099

Title VT  
Name WRIGHT, DANIEL J  
Address 120 FIFTH AVENUE  
P6106  
City-State-Zip: PITTSBURGH PA 15222-3099

Title DIRECTOR  
Name CARSON, RAY H JR.  
Address 120 FIFTH AVENUE  
P6106  
City-State-Zip: PITTSBURGH PA 15222-3099

Title DIRECTOR  
Name DETURK, NANETTE P  
Address 120 FIFTH AVENUE  
P6106  
City-State-Zip: PITTSBURGH PA 15222-3099

Title DIRECTOR  
Name MATTERE, DAVID M  
Address 120 FIFTH AVENUE  
P6106  
City-State-Zip: PITTSBURGH PA 15222-3099

Title DIRECTOR  
Name NAPIER, DONALD P  
Address 120 FIFTH AVENUE  
P6106  
City-State-Zip: PITTSBURGH PA 15222-3099

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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: DANIEL J. WRIGHT**

**VT**

**04/09/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           O'MALLEY, DANIEL W  
Address        120 FIFTH AVENUE  
                P6106  
City-State-Zip:  PITTSBURGH PA 15222-3099

Title           DIRECTOR  
Name           STALLKAMP, WILLIAM J  
Address        120 FIFTH AVENUE  
                P6106  
City-State-Zip:  PITTSBURGH PA 15222-3099