

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40558

FILED
Jan 28, 2013
Secretary of State
CC0685783877

Entity Name: CASTLEPOINT NATIONAL INSURANCE COMPANY

Current Principal Place of Business:

222 S. RIVERSIDE PLAZA
SUITE 1600
CHICAGO, IL 60606

Current Mailing Address:

120 BROADWAY
31ST FLOOR
NEW YORK, NY 10271 US

FEI Number: 23-2182777

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 PCEO
Name LEE, MICHAEL H
Address 120 BROADWAY, 31ST FLOOR
City-State-Zip: NEW YORK NY 10271

Title CFOD
Name HITSSELBERGER, WILLIAM E
Address 120 BROADWAY, 31ST FLOOR
City-State-Zip: NEW YORK NY 10271

Title SVPG
Name OROL, ELLIOT S
Address 120 BROADWAY, 31ST FLOOR
City-State-Zip: NEW YORK NY 10271

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: ELLIOT OROL

SECRETARY

01/28/2013

Electronic Signature of Signing Officer/Director Detail

Date