2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 018338

Entity Name: CAROLINA CASUALTY INSURANCE COMPANY

FILED Mar 24, 2005 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:		
BUILDING	ICHTON ROAD 3 100, STE. 400 IVILLE, FL 322				
Current Mailing Address:			New Mailing Address:		
P.O. BOX JACKSON	2575 IVILLE, FL 322	032575 US			
FEI Number: 59-0733942 FEI Number Applied For ()			FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	d Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:		
P O BOX 6 200 E. GA TALLAHAS The above	SSEE, FL 3239 named entity s	00)	ourpose of changing i	ts registered off	fice or registered agent, or bo
in the State	e of Florida.				
SIGNATUI					
Election Co		ic Signature of Registered Age	ent		Date
Election Cal	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip:	PD () BLUMBERG, AI 8381 DIX ELLIS JACKSONVILLE	STRAIL	Title: Name: Address: City-St-Zip:	BLUMBERG, AR	N ROAD EAST, BLD 100, STE 400
Title: Name: Address: City-St-Zip:	VT () WOTHE, GARY 8381 DIX ELLIS JACKSONVILLE	STRAIL	Title: Name: Address: City-St-Zip:	WOTHE, GARY	N RD EAST, BLD 100, STE 400
Title: Name: Address: City-St-Zip:	CD () BERKLEY, W F 475 STEAMBO GREENWICH, (AT RD	Title: Name: Address: City-St-Zip:	()(Change () Addition
Title: Name: Address: City-St-Zip:	S () SUTHERLAND, 8381 DIX ELLIS JACKSONVILLE	STRAIL	Title: Name: Address: City-St-Zip:	SUTHERLAND, E	N RD EAST, BLD 100, STE 400
Title: Name: Address:	VD () STARMER, CAR 8381 DIX ELLIS		Title: Name: Address:	STARMER, CAR	Change()Addition ROLL D. N RD EAST, BLD 100, STE 400

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ARMIN W. BLUMBERG PD 03/24/2005

JACKSONVILLE, FL

City-St-Zip:

JACKSONVILLE, FL 32246