2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 801165

Entity Name: AIU INSURANCE COMPANY

Current Principal Place of Business:

80 PINE STREET
NEW YORK, NY 10005   US

New Principal Place of Business:

175 WATER STREET
NEW YORK, NY 10038   US

Current Mailing Address:

80 PINE STREET
NEW YORK, NY 10005   US

New Mailing Address:

175 WATER STREET
NEW YORK, NY 10038   US

FEI Number: 13-5303710   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
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

OFFICERS AND DIRECTORS:

Title: PD
Name: WALSH, NICHOLAS C
Address: 175 WATER STREET
City-St-Zip: NEW YORK, NY 10038 US

Title: VP
Name: LOWMAN, JOSEPHINE B
Address: ONE NEW YORK PLAZA
City-St-Zip: NEW YORK, NY 10004 US

Title: S
Name: DUFFY, VICTORIA B
Address: 175 WATER STREET
City-St-Zip: NEW YORK, NY 10038 US

Title: AS
Name: ROEHRS, CHRISTOPHER
Address: 175 WATER STREET
City-St-Zip: NEW YORK, NY 10038 US

Title: D
Name: MUCERINO, RALPH W
Address: 175 WATER STREET
City-St-Zip: NEW YORK, NY 10038 US

Title: T
Name: SCHIMEK, ROBERT S
Address: 175 WATER STREET
City-St-Zip: NEW YORK, NY 10038 US

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: VICTORIA B. DUFFY   S   02/16/2011
 Electronic Signature of Signing Officer or Director   Date