## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 801262** 

Entity Name: AMERICAN HOME ASSURANCE COMPANY

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
70 PINE ST NEW YORK	REET (, NY 10270	US						
Current Mailing Address:				New Mailing Address:				
70 PINE STREET ATTN E M TUCK NEW YORK, NY 10270 US			70 PINE STREET ATTN PATRICK BURKE NEW YORK, NY 10270 US					
FEI Number:	13-5124990	FEI Number Applied For ( )	FEI Nun	nber Not Appli	icable ( )	Certifica	te of Status Desired ( )	
Name and Address of Current Registered Agent: Name					ame and Address of New Registered Agent:			
INSURANCE COMMISSIONER THE CAPITAL BLDG 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				
Election Campaign Financing Trust Fund Contribution ( ).								
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	CD () D MOOR, KRISTIAN 70 PINE STREET NEW YORK, NY	I P		Title: Name: Address: City-St-Zip:	()	Change (	) Addition	
Title: Name: Address: City-St-Zip:	PD () D DOYLE, JOHN Q 70 PINE STREET NEW YORK, NY			Title: Name: Address: City-St-Zip:	( )	Change(	) Addition	
Title: Name: Address: City-St-Zip:	SVPD () D DANGELO, CHAR 70 PINE STREET NEW YORK, NY	LES H		Title: Name: Address: City-St-Zip:	SVPD (X) HOLLAND, AND 70 PINE STREE NEW YORK, NY	REW T	( ) Addition	
Title: Name: Address: City-St-Zip:	SVP () D DOUGLAS, FRAN 70 PINE STREET NEW YORK, NY	KH JR.		Title: Name: Address: City-St-Zip:	( )	Change (	) Addition	
Title: Name: Address: City-St-Zip:	SVPD () D HARKINS, KENNE 70 PINE STREET NEW YORK, NY			Title: Name: Address: City-St-Zip:	()	Change (	) Addition	
Title: Name: Address: City-St-Zip:	S () D TUCK, ELIZABET 70 PINE STREET NEW YORK, NY			Title: Name: Address: City-St-Zip:	S (X) HOLLAND, ANDI 70 PINE STREE NEW YORK, NY	REW T	( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: ANDREW HOLLAND S 04/28/2009