

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 801340

FILED
Jan 18, 2007
Secretary of State

Entity Name: MARYLAND CASUALTY COMPANY

Current Principal Place of Business:

3910 KESWICK ROAD
BALTIMORE, MD 21211 US

New Principal Place of Business:

Current Mailing Address:

CORPORATE LAW
1400 AMERICAN LANE
SCHAUMBURG, IL 60196 US

New Mailing Address:

FEI Number: 52-0403120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 US

Name and Address of New Registered Agent:

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:

Title: DCEO () Delete
Name: LEHMANN, AXEL
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: DP () Delete
Name: MANNELLO, LOUIS J
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: DSEC () Delete
Name: BOWERS, DAVID A
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: DEVP () Delete
Name: ENGEL, JAMES D
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: SVPT () Delete
Name: CALLAHAN, MARYFRAN
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DEVP (X) Change () Addition
Name: MALLIE, TINA
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID A. BOWERS

DSEC

01/18/2007

Electronic Signature of Signing Officer or Director

Date