

2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 803620

FILED
Jun 15, 2011
Secretary of State

Entity Name: HARTFORD CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

ONE HARTFORD PLAZA
HARTFORD, CT 06155 US

New Principal Place of Business:

Current Mailing Address:

ONE HARTFORD PLAZA
T-16-85
HARTFORD, CT 06155 US

New Mailing Address:

FEI Number: 06-0294398 **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

OFFICERS AND DIRECTORS:

Title: CEO
Name: NAPOLI, ANDRE A
Address: ONE HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06155 US

Title: EVP
Name: BENNETT, JONATHAN R
Address: ONE HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06155 US

Title: EVP
Name: KRECZKO, ALAN J
Address: ONE HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06155 US

Title: EVP
Name: MCGREEVEY, GREGORY G
Address: ONE HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06155 US

Title: EVP
Name: PINKES, ANDREW J
Address: ONE HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06155 US

Title: EVP
Name: THOMPSON, GARY J
Address: ONE HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06155 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: JAMES M. YANOSY

VP&C

06/15/2011

Electronic Signature of Signing Officer or Director

Date

HARTFORD CASUALTY INSURANCE COMPANY (NAIC 29424)
DOCUMENT # 803620 - ADDITIONS

EVP
THOMPSON, GARY J
ONE HARTFORD PLAZA
HARTFORD, CT 06155

EVP
WHELLEY, EILEEN G
ONE HARTFORD PLAZA
HARTFORD, CT 06155

SVP/D
CARLSON, DAVID A
ONE HARTFORD PLAZA
HARTFORD, CT 06155

SVP/CA
KOOKEN, MICHAEL W
ONE HARTFORD PLAZA
HARTFORD, CT 06155

SVP/T
PAINO, ROBERT W
ONE HARTFORD PLAZA
HARTFORD, CT 06155

VP/CFO
BATEMAN, ROBERT H
ONE HARTFORD PLAZA
HARTFORD, CT 06155

S
SHIELDS, TERENCE D
ONE HARTFORD PLAZA
HARTFORD, CT 06155

AVP
ZWECKER, MELINDA
ONE HARTFORD PLAZA
HARTFORD, CT 06155

VP
CUBANSKI, JAMES
ONE HARTFORD PLAZA
HARTFORD, CT 06155