2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 808387

Entity Name: WESTFIELD INSURANCE COMPANY

FILED Jan 22, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
ONE PARK CIRCLE P.O. BOX 5001 WESTFIELD CENTER, OH 442515001			ONE PARK CIRCLE WESTFIELD CENTER, OH 442515001			
Current Mailing Address:				New Mailing Address:		
ONE PARK CIRCLE P.O. BOX 5001 WESTFIELD CENTER, OH 442515001				ONE PARK CIRCLE WESTFIELD CENTER, OH 442515001		
FEI Number: 34-6516838 FEI Number Applied For () FEI Nu		FEI Num	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 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 Election Campaign Financing Trust Fund Contribution ().						Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CCEO () E JOYCE, ROBERT 6478 FOXGLOVE MEDINA, OH 442	DRIVE		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	PRES () E MCMANUS, ROG 8801 VIRGINIA D WESTFIELD CEN	R		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	SE () E ADORNETTO, JO 8818 VIRGINIA D WESTFIELD CEN	RIVE		Title: Name: Address: City-St-Zip:	CLAY, JAMES R 6661 SMUCKER	
Title: Name: Address: City-St-Zip:	SE () DAUGHERTY, A. 4120 FOX MEAD MEDINA, OH			Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	CFOT () E KRISOWATY, RC 8655 VIRGINIA D WESTFIELD CEN	RIVE		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	AS () EBATCHELDER, J 516 EAST LIBER MEDINA, OH 442	TY STREET		Title: Name: Address: City-St-Zip:	SEC (X) CARRINO, FRAN 3564 OLD HICK MEDINA, OH 44	ORY LANE

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: FRANK A. CARRINO SEC 01/22/2007