


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 8:00 am
Secretary of State

01-31-2006 90012 022 ***158.75

DOCUMENT # 814468
 1. Entity Name
GREENWICH INSURANCE COMPANY



Principal Place of Business Mailing Address
1201 NORTH MARKET STREET **70 SEAVIEW AVE.**
SUITE 501 **SEAVIEW HOUSE**
WILMINGTON, DE 19801 US **STAMFORD, CT 06902-6040 US**

60009305



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

01132006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For
95-1479095 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BANAS, RICHARD S 20 N MARTINGALE RD, SUITE 200 SCHAUMBURG, IL 60173	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BENNETT, LEE L 70 SEAVIEW AVE. STAMFORD, CT 06902	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BUSE, CHRISTOPHER F 70 SEAVIEW AVE. STAMFORD, CT 06902	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MILLER, RICHARD H 70 SEAVIEW AVE. STAMFORD, CT 06902	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CORBETT, RICHARD T JR 520 EAGLEVIEW BLVD EXTON, PA 19341	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT CARINO, GABRIEL G 70 SEAVIEW AVE STAMFORD, CT 06902	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>See Attached</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth P. Meagher* **Kenneth P. Meagher**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
60009305

GREENWICH INSURANCE COMPANY

2006 For Profit Corporation

Annual Report (Document #: 814468)

Attachment to Block 11.

TITLE: V
NAME: Gregory A. Douglas
STREET ADDRESS: 70 Seaview Avenue
CITY - ST - ZIP: Stamford, CT 06902-6040

TITLE: D/V
NAME: David B. Duclos
STREET ADDRESS: 520 Eagleview Boulevard
CITY - ST - ZIP: Exton, PA 19341

TITLE: D/V
NAME: Janet E. Duncan
STREET ADDRESS: 70 Seaview Avenue
CITY - ST - ZIP: Stamford, CT 06902-6040

TITLE: D/V
NAME: Penny A. Foltz
STREET ADDRESS: 1201 North Market Street, Suite 501
CITY - ST - ZIP: Wilmington, DE 19801

TITLE: D/P
NAME: Dennis P. Kane
STREET ADDRESS: One World Financial Center
STREET ADDRESS: 200 Liberty Street, 27th Floor
CITY - ST - ZIP: New York, NY 10281

TITLE: D/V
NAME: Robert P. Klepper
STREET ADDRESS: One World Financial Center
STREET ADDRESS: 200 Liberty Street, 27th Floor
CITY - ST - ZIP: New York, NY 10281

ATTACHMENT

60009305
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Change

TITLE: D/V/S
NAME: Kenneth P. Meagher
STREET ADDRESS: 70 Seaview Avenue
CITY - ST - ZIP: Stamford, CT 06902-6040

TITLE: V
NAME: Thomas W. Muller
STREET ADDRESS: 70 Seaview Avenue
CITY - ST - ZIP: Stamford, CT 06902-6040

Delete

TITLE: V
NAME: Sean F. Murphy
STREET ADDRESS: 70 Seaview Avenue
CITY - ST - ZIP: Stamford, CT 06902-6040

TITLE: V
NAME: Robert Nason
STREET ADDRESS: 70 Seaview Avenue
CITY - ST - ZIP: Stamford, CT 06902-6040

Delete

TITLE: V
NAME: Douglas L. Olsen
STREET ADDRESS: 70 Seaview Avenue
CITY - ST - ZIP: Stamford, CT 06902-6040

TITLE: D/V
NAME: David B. Porteus
STREET ADDRESS: One Constitution Plaza, 9th Floor
CITY - ST - ZIP: Hartford, CT 06103

ATTACHMENT

60009305
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TITLE: D/C
NAME: Clive Tobin
STREET ADDRESS: 70 Gracechurch Street
STREET ADDRESS: London
CITY - ST - ZIP: EC3V OXL United Kingdom

TITLE: D
NAME: Michael A. Zauderer
STREET ADDRESS: 70 Seaview Avenue
CITY - ST - ZIP: Stamford, CT 06902-6040