

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816159

FILED
Jan 05, 2005
Secretary of State

Entity Name: XL CAPITAL ASSURANCE INC.

Current Principal Place of Business:

1221 AVENUE OF THE AMERICAS
31ST FLOOR
NEW YORK, NY 100201001 US

New Principal Place of Business:

Current Mailing Address:

1221 AVENUE OF THE AMERICAS
31ST FLOOR
NEW YORK, NY 100201001 US

New Mailing Address:

FEI Number: 13-3635895

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: PRES () Delete
Name: STEVENS, DAVID C
Address: 1221 AVE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020 US

Title: SMD () Delete
Name: CZARK, STEVEN P
Address: 1221 AVE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020 US

Title: SMD () Delete
Name: CZERNIECKI, DAVID E
Address: 1221 AVE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020 US

Title: GC () Delete
Name: HNAT, FREDERICK B
Address: 1221 AVE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020 US

Title: CEO () Delete
Name: ESPOSITO, MICHAEL P JR.
Address: 1221 AVE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020 US

Title: OFFI () Delete
Name: BLACKWOOD, ANGELLA A
Address: 1221 AVE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HUBBARD, EDWARD B
Address: 1221 AVE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020 US

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

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

Title: GC (X) Change () Addition
Name: COMPARATO, SUSAN
Address: 1221 AVE OF THE AMERICAS
City-St-Zip: NEW YORK, NY 10020 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANGELLA BLACKWOOD

OFFI

01/05/2005

Electronic Signature of Signing Officer or Director

Date