2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

DOCUMENT# 818856

Entity Name: AMERICAN ECONOMY INSURANCE COMPANY

Current Principal Place of Business:

500 N. MERIDIAN STREET
INDIANAPOLIS, IN 46204 US

New Principal Place of Business:

350 EAST 96TH STREET
INDIANAPOLIS, IN 46240 US

Current Mailing Address:

175 BERKELEY ST
BOSTON, MA 02116 US

New Mailing Address:

FEI Number: 35-1044900 **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: COBD
Name: CONFRIN, J P III
Address: 175 BERKELEY ST
City-St-Zip: BOSTON, MA 02116 US

Title: CFOD
Name: FALLON, MICHAEL
Address: 175 BERKELEY ST
City-St-Zip: BOSTON, MA 02116 US

Title: COO
Name: GOODBY, SCOTT
Address: 175 BERKELEY ST
City-St-Zip: BOSTON, MA 02116 US

Title: CII
Name: FONTANES, A. A
Address: 175 BERKELEY ST
City-St-Zip: BOSTON, MA 02116 US

Title: SEC
Name: LEGG, DEXTER R
Address: 175 BERKELEY ST
City-St-Zip: BOSTON, MA 02116 US

Title: ASEC
Name: CIOTTI, KRISTIN K
Address: 175 BERKELEY ST
City-St-Zip: BOSTON, MA 02116 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: KRISTIN K. CIOTTI ASEC 04/26/2011

Electronic Signature of Signing Officer or Director — Date