

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 822052

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: CENTURY INDEMNITY COMPANY

## Current Principal Place of Business:

436 WALNUT ST  
PHILADELPHIA, PA 19106 US

## New Principal Place of Business:

## Current Mailing Address:

436 WALNUT ST  
PHILADELPHIA, PA 19106 US

## New Mailing Address:

FEI Number: 06-6105395

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: S  
Name: DRAGO, DANIEL L  
Address: 436 WALNUT ST  
City-St-Zip: PHILADELPHIA, PA 19106 US

Title: PD  
Name: ESKELAND, CHRISTOPHER J  
Address: 436 WALNUT ST.  
City-St-Zip: PHILADELPHIA, PA 19106 US

Title: T  
Name: TANGUAY, STEPHEN E  
Address: 436 WALNUT ST.  
City-St-Zip: PHILADELPHIA, PA 19106 US

Title: D  
Name: MACQUEEN, MARK H  
Address: 436 WALNUT ST  
City-St-Zip: PHILADELPHIA, PA 19106 US

Title: D  
Name: MATTIOLI, SHELBY  
Address: 436 WALNUT ST  
City-St-Zip: PHILADELPHIA, PA 19106 US

Title: D  
Name: WAMSER, THOMAS J  
Address: 436 WALNUT ST  
City-St-Zip: PHILADELPHIA, PA 19106 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: DANIEL L. DRAGO

S

04/27/2012

Electronic Signature of Signing Officer or Director

Date