

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 825007

FILED  
Feb 15, 2011  
Secretary of State

Entity Name: SOMPO JAPAN INSURANCE COMPANY OF AMERICA

**Current Principal Place of Business:**

TWO WORLD FINANCIAL CENTER, 43RD FLOOR  
225 LIBERTY STREET  
NEW YORK, NY 10281

**New Principal Place of Business:**

**Current Mailing Address:**

TWO WORLD FINANCIAL CENTER, 43RD FLOOR  
225 LIBERTY STREET  
NEW YORK, NY 10281 US

**New Mailing Address:**

TWO WORLD FINANCIAL CENTER  
225 LIBERTY STREET, 43RD FLOOR  
NEW YORK, NY 10281

FEI Number: 13-2554270

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: VD  
Name: MCELROY, JOHN J  
Address: 368 QUAKER CHURCH ROAD  
City-St-Zip: RANDOLPH, NJ 07869 US

Title: D  
Name: TAFRO, RICHARD  
Address: 562 W. SADDLE RIVER ROAD  
City-St-Zip: UPPER SADDLE RIVER, NJ 07458 US

Title: PDC  
Name: TAKAHASHI, MASAMI  
Address: 240 EAST 39TH STREET, APT. 43E  
City-St-Zip: NEW YORK, NY 10016 US

Title: VTD  
Name: HIROHITO, MORISAKI  
Address: 240 EAST 39TH STREET, APT. 36D  
City-St-Zip: NEW YORK, NY 10016 US

Title: VSD  
Name: JOHN, CALOTTA  
Address: 165 EAST 66TH STREET  
City-St-Zip: NEW YORK, NY 10065 US

Title: D  
Name: KEEFE, HARRY  
Address: 147 FERNWOOD TERRACE  
City-St-Zip: STEWART MANOR, NY 11530 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: JOHN J. MCELROY

VD

02/15/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date