2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2011
Secretary of State

DOCUMENT# 835058

Entity Name: AXA RE PROPERTY AND CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

1209 ORANGE ST
WILMINGTON, DE 19801 US

New Principal Place of Business:

Current Mailing Address:

17 STATE STREET
NEW YORK, NY 100041501 US

New Mailing Address:

FEI Number: 04-2482364 **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: PD
Name: SCHERER, ALEXANDRE
Address: 17 STATE STREET
City-St-Zip: NEW YORK, NY 10004

Title: SVPS
Name: WILCHER, SUSAN B
Address: 17 STATE STREET
City-St-Zip: NEW YORK, NY 10004

Title: VTD
Name: THAWANI, ARJUN
Address: 17 STATE STREET
City-St-Zip: NEW YORK, NY 10004

Title: V
Name: PERRY, RODERICK
Address: 17 STATE STREET
City-St-Zip: NEW YORK, NY 10004

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: LINDA GROSS AVP 02/10/2011

Electronic Signature of Signing Officer or Director Date