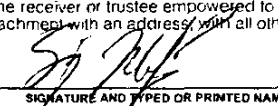


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90054 021 ***150.00

DOCUMENT # 837141 1. Entity Name EVEREST REINSURANCE COMPANY					
Principal Place of Business 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938 US			Mailing Address 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 22-2005057 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				01172008 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
check #158204 attached FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CALLAHAN, SCOTT B 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/CFO/EVP EISENACHER, CRAIG E. 477 MARTINSVILLE RD LIBERTY CORNER NJ 07938	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C TARANTO, JOSEPH V 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER/SVP LOPAPA, FRANK N. 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP MUKHERJEE, SANJOY 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D/SVP MUKHERJEE, SANJOY 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GALLAGHER, THOMAS J 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP MESTMAN, STEVEN A 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP SCHMIDT, DAVID E 477 MARTINSVILLE RD LIBERTY CORNER, NJ 07938	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered					
SIGNATURE: 			Sanjoy Mukherjee February 04, 2008 908-604-3573		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		