

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847767

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** SELECTIVE INSURANCE COMPANY OF THE SOUTHEAST

**Current Principal Place of Business:**

11711 NORTH MERIDIAN STREET  
SUITE 800  
CARMEL, IN 46032

**New Principal Place of Business:**

**Current Mailing Address:**

ATTN: LEGAL DEPARTMENT  
40 WANTAGE AVENUE  
BRANCHVILLE, NJ 07890 US

**New Mailing Address:**

**FEI Number:** 56-1285899      **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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: MURPHY, GREGORY E  
Address: 40 WANTAGE AVENUE  
City-St-Zip: BRANCHVILLE, NJ 07890

Title: SEVP  
Name: CONNELL, RICHARD F  
Address: 40 WANTAGE AVENUE  
City-St-Zip: BRANCHVILLE, NJ 07890

Title: VP  
Name: HARNETT, ANTHONY D  
Address: 40 WANTAGE AVENUE  
City-St-Zip: BRANCHVILLE, NJ 07890

Title: EVP  
Name: MARCHIONI, JOHN J  
Address: 40 WANTAGE AVENUE  
City-St-Zip: BRANCHVILLE, NJ 07890

Title: CSD  
Name: LANZA, MICHAEL H  
Address: 40 WANTAGE AVE  
City-St-Zip: BRANCHVILLE, NJ 07890

Title: EVP  
Name: THATCHER, DALE A  
Address: 40 WANTAGE AVE  
City-St-Zip: BRANCHVILLE, NJ 07890

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: MICHAEL H. LANZA

CSD

01/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date