

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848863

FILED  
Mar 19, 2011  
Secretary of State

Entity Name: ULLICO CASUALTY COMPANY

**Current Principal Place of Business:**

1209 ORANGE ST.  
WILMINGTON, DE 19801

**New Principal Place of Business:**

1625 EYE STREET, NW  
WASHINGTON, DC 20006

**Current Mailing Address:**

1209 ORANGE ST.  
WILMINGTON, DE 19801

**New Mailing Address:**

1625 EYE STREET, NW  
WASHINGTON, DC 20006

FEI Number: 13-2988846

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: PDIR  
Name: ARONOWITZ, DANIEL  
Address: 1625 EYE STREET, NW  
City-St-Zip: WASHINGTON, DC 20006

Title: SEC  
Name: TERESA ELIZABETH, VALENTINE  
Address: 1625 EYE STREET, NW  
City-St-Zip: WASHINGTON, DC 20006

Title: TDIR  
Name: GASQUE, DAMON  
Address: 1625 EYE STREET, NW  
City-St-Zip: WASHINGTON, DC 20006

Title: DIR  
Name: BARRA, DAVID  
Address: 1625 EYE STREET, NW  
City-St-Zip: WASHINGTON, DC 20006

Title: DIR  
Name: BARRA, DAVID A  
Address: 1625 EYE STREET, NW  
City-St-Zip: WASHINGTON, DC 20006

Title: DIR  
Name: GUSTAFSON, SARAH C  
Address: 1625 EYE STREET, NW  
City-St-Zip: WASHINGTON, DC 20006

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: LAURA LOUIS

POA

03/19/2011

Electronic Signature of Signing Officer or Director

Date