2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2003
Secretary of State

DOCUMENT# 851978

Entity Name: TIG INDEMNITY COMPANY

Current Principal Place of Business:

5205 N O'CONNOR BLVD
IRVING, TX 75039 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 152870
IRVING, TX 75015 US

New Mailing Address:

FEI Number: 95-1429618 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORIDA STATE INSURANCE COMMISSIONER
STATE CAPITOL, PLAZA LEVEL ELEVEN
TALLAHASEE, FL 32399 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:	PD	( ) Delete
Name:	SMITH, COURTNEY C	
Address:	5205 N O'CONNOR BLVD	
City-St-Zip:	IRVING, TX 75039	
Title:	VSD	( ) Delete
Name:	HUFF, WILLIAM H III	
Address:	5205 N. O'CONNOR BLVD.	
City-St-Zip:	IRVING, TX	
Title:	D	( ) Delete
Name:	DONOVAN, R S	
Address:	5205 N. O'CONNOR BLVD.	
City-St-Zip:	IRVING, TX 75039	
Title:	DM	( ) Delete
Name:	MAGEE III, JOHN C	
Address:	5205 N. O'CONNOR BLVD.	
City-St-Zip:	IRVING, TX 75039	
Title:	T	( ) Delete
Name:	ARIZAGA, NICOLAS A	
Address:	5205 N O'CONNER BLVD	
City-St-Zip:	IRVING, TX 75039	
Title:	DM	(X) Delete
Name:	FONTEIN, FREDERICK M	
Address:	5205 N O'CONNOR BLVD	
City-St-Zip:	IRVING, TX 75039	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P D	(X) Change ( ) Addition
Name:	DONOVAN, SCOTT	
Address:	5205 N O'CONNOR BLVD	
City-St-Zip:	IRVING, TX 75039	
Title:	S D	(X) Change ( ) Addition
Name:	GILLETT, WILLIAM	
Address:	250 COMMERCIAL STREET, SUITE 5000	
City-St-Zip:	MANCHESTER, NH 03101	
Title:	D	(X) Change ( ) Addition
Name:	GIBBS, DENNIS	
Address:	250 COMMERCIAL STREET, SUITE 5000	
City-St-Zip:	MANCHESTER, NH 03101	
Title:	D T	(X) Change ( ) Addition
Name:	SLUKA, MICHAEL	
Address:	250 COMMERCIAL STREET, SUITE 5000	
City-St-Zip:	MANCEHSTER, NH 03101	
Title:	AS	(X) Change ( ) Addition
Name:	BOWDEN, TRACY	
Address:	5205 N O'CONNER BLVD	
City-St-Zip:	IRVING, TX 75039	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TRACY BOWDEN AS 02/19/2003

Electronic Signature of Signing Officer or Director — Date