

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 854208

FILED
Apr 29, 2010
Secretary of State

Entity Name: ARCH INSURANCE COMPANY

Current Principal Place of Business:

300 PLAZA THREE
JERSEY CITY, NJ 07311 US

New Principal Place of Business:

ONE LIBERTY PLAZA
53RD FLOOR
NY, NY 10006 US

Current Mailing Address:

300 PLAZA THREE
JERSEY CITY, NJ 07311 US

New Mailing Address:

300 PLAZA THREE
3RD FLOOR
JERSEY CITY, NJ 07311 US

FEI Number: 43-0990710

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: LYONS, MARK D
Address: 300 PLAZA THREE
City-St-Zip: JERSEY CITY, NJ 07311

Title: DSVP
Name: NILSEN, MARTIN J
Address: 300 PLAZA THREE
City-St-Zip: JERSEY CITY, NJ 07311

Title: CFO
Name: EICHLER, FRED S
Address: 300 PLAZA THREE
City-St-Zip: JERSEY CITY, NJ 07311

Title: VP
Name: LABELL, JOSEPH
Address: 300 FIRST STAMFORD PLACE 5TH FLOOR
City-St-Zip: STAMFORD, CT 06902

Title: EVPD
Name: DENNIS, BRAND
Address: 300 PLAZA THREE
City-St-Zip: JERSEY CITY, NJ 07311

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: MELISSA B GILLIGAN

AS

04/29/2010

Electronic Signature of Signing Officer or Director

Date