2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2010
Secretary of State

DOCUMENT# F00000001445

Entity Name: MID-CONTINENT CASUALTY COMPANY

Current Principal Place of Business:

1437 S. BOULDER AVE
SUITE #200
TULSA, OK 741191409 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1409
TULSA, OK 741011409 US

New Mailing Address:

FEI Number: 73-0556513 **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: D
Name: GRUBER, GARY J
Address: 580 WALNUT ST
City-St-Zip: CINCINNATI, OH 45202

Title: DS
Name: HORRELL, KAREN HOLLEY
Address: 580 WALNUT ST
City-St-Zip: CINCINNATI, OH 45202

Title: DV
Name: LARSON, DONALD D
Address: 580 WALNUT ST
City-St-Zip: CINCINNATI, OH 45202

Title: DC
Name: LINDNER, CARL H III
Address: 580 WALNUT ST
City-St-Zip: CINCINNATI, OH 45202

Title: D
Name: LINDNER, S. CRAIG
Address: ONE EAST 4TH STREET
City-St-Zip: CINCINNATI, OH 45202

Title: DPC
Name: PIERCE, J.L.
Address: 1437 S BOULDER AVE SUITE 200
City-St-Zip: TULSA, OK 74119

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: SARA ANDERSON AS 03/29/2010

Electronic Signature of Signing Officer or Director — Date