2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005429

Entity Name: OLD REPUBLIC LIFE INSURANCE COMPANY

FILED Mar 20, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

307 N. MICHIGAN AVE. CHICAGO, IL 60601

Current Mailing Address: New Mailing Address:

307 N. MICHIGAN AVE. CHICAGO, IL 60601

FEI Number: 36-1577440 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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: PCEO

Name: ZUCARO, ALDO C Address: 307 N. MICHIGAN AVE. City-St-Zip: CHICAGO, IL 60601

Title: VCFO

Name: MUELLER, KARL W Address: 307 N. MICHIGAN AVE. City-St-Zip: CHICAGO, IL 60601

Title: GCVS

Name: LEROY, SPENCER III
Address: 307 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 60601

Title: VT

Name: BOONE, CHARLES S Address: 307 N. MICHIGAN AVE. City-St-Zip: CHICAGO, IL 60601

Title: \

Name: SAVAGLIO, FRED M Address: 307 N. MICHIGAN AVE. City-St-Zip: CHICAGO, IL 60601

Title: \

Name: MILAZZO, LEONARD S Address: 307 N. MICHIGAN AVE. City-St-Zip: CHICAGO, IL 60601

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: FRED M. SAVAGLIO V 03/20/2012