

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001687

FILED
Jan 08, 2007
Secretary of State

Entity Name: QUANTA INDEMNITY COMPANY

Current Principal Place of Business:

4600 SO. ULSTER STREET, SUITE 930
DENVER, CO 80237

New Principal Place of Business:

Current Mailing Address:

10 ROCKEFELLER PLAZA
3RD FLOOR
NEW YORK, NY 10020

New Mailing Address:

FEI Number: 84-0583213 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
LARSON BLDG., 200 E. GAINES ST.
TALLAHASSEE, FL 323990301 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: CEO () Delete
Name: LIPPINCOTT, ROBERT III
Address: 10 ROCKEFELLER PLAZA, 3RD FLOOR
City-St-Zip: NEW YORK, NY 10020

Title: DIR () Delete
Name: BRANNERMAN, MARTHA G
Address: 10 ROCKEFELLER PLAZA, 3RD FLOOR
City-St-Zip: NEW YORK, NY 10020

Title: DIR () Delete
Name: ACCAME, GUILLERMO M
Address: 10 ROCKEFELLER PLAZA
City-St-Zip: NEW YORK, NY 10020

Title: TRES () Delete
Name: KING, KENNETH
Address: 10 ROCKEFELLER PLAZA
City-St-Zip: NEW YORK, NY 10020

Title: D () Delete
Name: DODD, JONATHAN R
Address: 10 ROCKEFELLER PLAZA 3RD FL
City-St-Zip: NEW YORK, NY 10020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: JOHNSON, PETER
Address: 10 ROCKEFELLER PLAZA, 3RD FLOOR
City-St-Zip: NEW YORK, NY 10020

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change () Addition
Name: REED, SEAN
Address: 10 ROCKEFELLER PLAZA
City-St-Zip: NEW YORK, NY 10020

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 Chapter 119, 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: JOHN CARR

VP

01/08/2007

Electronic Signature of Signing Officer or Director

_____ Date