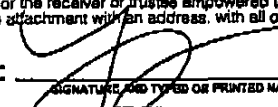


FILED
Mar 10, 2008 8:00 am
Secretary of State

03-10-2008 90059 040 ***150.00

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F04000002455		
1. Entity Name UNITED STATES FIRE INSURANCE COMPANY		
Principal Place of Business 305 MADISON AVENUE MORRISTOWN, NJ 07962	Mailing Address 305 MADISON AVENUE MORRISTOWN, NJ 07962	
DO NOT WRITE IN THIS SPACE		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		4. FEI Number 13-5459190
6. Name and Address of Current Registered Agent INSURANCE COMMISSIONER 200 EAST GAINES ST TALLAHASSEE, FL 32399		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE: _____ (NOTE: Registered Agent signature required when applicable) DATE: _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCD ANTONOPoulos, NIKOLAS Libby, Douglas M. 305 MADISON AVE. STAMFORD, CT 06926	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRAUNSTEIN, JOSEPH F 305 MADISON AVE. MORRISTOWN, NJ 07962	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DEBARE, HOWARD 305 MADISON AVE. MORRISTOWN, NJ 07962	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ROBERTSON, MARY JANE 305 MADISON AVE. MORRISTOWN, NJ 07962	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS 2008, CAROL Garland, Felicia 305 MADISON AVENUE MORRISTOWN, NJ 07962	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP CHADWICK, JACK W 305 MADISON AVE. MORRISTOWN, NJ 07962	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  Felicia L. Garland 3/5/08 973.490.6840		