## FILED Mar 05, 2007 8:00 am Secretary of State

## 2007 FOR PROFIT CORPORATION

ANNUAL REPORT					03-05-2007 90045 048 ***150.00			
DOCUMENT # F0600000870  1. Entity Name SECURITY INSURANCE COMPANY OF HARTFORD				400	28877			
Principal Place of Business 9300 ARROWPOINT BLVD., MS1313 CHARLOTTE, NC 28273		Mailing Address 9300 ARROWPOINT BLVD., MS1313 CHARLOTTE, NC 28273		t itempe in	i BBIIZ SIIIZ BBIIZ BBIIZ BBIIZ BBIIZ	BUE ABUIL BEIDLIBUIK IRBER AM	H <b>er</b> in 1881	
2. Principal Place of Business - No P.O. Box #  3600 Arco Corporate Drive Suite, Apt. #, etc.		3. Mailing Address 3600 Arca Corporate Drive Suite, Apt. #, etc.		01092007	Chg-P	CR2E034 (12/06)		
City & State Charlotte, NC Zip Country		City & State Charlotte, NC Zip Country		4. FEI Numb 06-052	9570	<u> </u>	oplied For ot Applicable	
2827		28273_				Fee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE, FL 32301-2525			City			FL Zip Cod	e	
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. If am familiar with, and a the obligations of registered agent.							and accept	
SIGNATURE								
englement types at printing against an array of general and the against a Again and Again and the against a Again and Again and the against a Again and Agai								
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  9. Election Campaign Financing Added to Fees								
10.	OFFICERS AND D	RECTORS	11.	ADDITIONS/	CHANGES TO OFFICE	RS AND DIRECTORS	3 IN 11	
TITLE	CDP	Defete	TITLE	PCED		Change	Addition	
NAME	TIGHE, JOHN	, e <sup>, /</sup>	NAME	3400 Arco Cor	A Notice			
STREET ADDRESS	9300 ARROWPOINT BLVD.	· •	STREET ADDRESS				ļ	
CITY-ST-ZIP	CHARLOTTE, NC 28273		CITY-ST-ZIP	charlotte, No	28213			
TITLE	D DEATTY OF AN A	☐ Delete	TITLE	Dave		🔀 Change	Addition (	
NAME STREET ADDRESS	BEATTY, SEAN A 9300 ARROWPOINT BLVD.	1	NAME STREET ADDRESS	3600 Arco Cor	porade Drive		ľ	
CITY-ST-ZIP	CHARLOTTE, NC 28273	1	CfTY-ST-ZIP	Charlotte, NO	28273		}	
TITLE	V	☐ Delete	TITLE	VPC	<del></del>	Change	Addition	
NAME	DAVENPORT, DAVID M		NAME	Ĭ	, <u> </u>		_	
STREET ADDRESS	9300 ARROWPOINT BLVD.		STREET ADDRESS	3600 Arco Co		٠		
CITY-ST-ZIP	CHARLOTTE, NC 28273		CITY-ST-ZIP	Charlotte, No	28273			
TITLE NAME	S PETTIGREW, LINDA Y	☐ Delete	TITLE NAME	CS		🔀 Change	Addition	
STREET ADDRESS	9300 ARROWPOINT BLVD.		STREET ADDRESS	3600 Arco Co	rporate Drive			
CITY-ST-ZIP	CHARLOTTE, NC 28273	į	CITY-ST-ZIP	Charlotte, N				
TITLE	T	☐ Delete	TITLE			<b>⊠</b> Change	Addition	
NAME	FULLER, GWYN	i	NAME				-	
STREET ADDRESS	9300 ARROWPOINT BLVD.		STREET ADDRESS	3100 Arco C	orporate Driv	, <b>C</b>	-	
CHY-ST-ZIP	CHARLOTTE, NC 28273		CiTY-ST-ZIP	Charlotte, DSVP	NC 28273			
TITLE NAME		Defete	TITLE NAME	Mechan, Jan	nes F.	☐ Change	Addition	
STREET ADDRESS	•		STREET ADDRESS	3400 Arco (	ind storograf	, e	İ	
CITY-ST-ZIP		<b>]</b>	CITY-ST-ZIP	Charlotte,				
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 607, 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: David Davenport 1/26/07 704-522-2000 Daving OFFICER OR DIRECTOR Davenport D								