

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002367

FILED
Mar 26, 2012
Secretary of State

Entity Name: AMERICAN CONTINENTAL INSURANCE COMPANY

Current Principal Place of Business:

101 CONTINENTAL PLACE
BRENTWOOD, TN 37027

New Principal Place of Business:

Current Mailing Address:

6620 W BROAD ST
BLDG. 1, LAW DEPT.
RICHMOND, VA 23230

New Mailing Address:

151 FARMINGTON AVENUE
RT65
HARTFORD, CT 06156

FEI Number: 20-2901054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: PCEO
Name: WOOLDRIDGE, TYREE S
Address: 6620 W BROAD ST
City-St-Zip: RICHMOND, VA 23230

Title: CFOD
Name: JONES, STEPHEN B
Address: 101 CONTINENTAL PLACE
City-St-Zip: BRENTWOOD, TN 37027

Title: SVPS
Name: HENDRICH, STEVEN L
Address: 101 CONTINENTAL PLACE
City-St-Zip: BRENTWOOD, TN 37027

Title: VPT
Name: COFRANCESCO, ELAINE R
Address: 151 FARMINGTON AVENUE
City-St-Zip: HARTFORD, CT 06156

Title: VP
Name: ATCHISON, MICHAEL A
Address: 151 CONTINENTAL PLACE
City-St-Zip: BRENTWOOD, TN 37027

Title: CONT
Name: SHELTON, BRAD E
Address: 151 FARMINGTON AVENUE
City-St-Zip: HARTFORD, CT 06156

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: EDWARD C. LEE

VPAS

03/26/2012

Electronic Signature of Signing Officer or Director

Date