

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004103

FILED
Jan 23, 2012
Secretary of State

Entity Name: LEXINGTON NATIONAL INSURANCE CORPORATION

Current Principal Place of Business:

11426 YORK ROAD
2ND FLOOR
HUNT VALLEY, MD 21030

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6098
LUTHERVILLE, MD 21094

New Mailing Address:

FEI Number: 52-1662720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: CP
Name: FRANK, BRIAN J
Address: 11426 YORK RD, 2ND FLOOR
City-St-Zip: HUNT VALLEY, MD 21030

Title: D
Name: FENNELL, LORENZO B
Address: 1128 BEECH DRIVE
City-St-Zip: BALTIMORE, MD 21220

Title: VD
Name: FRANK, PHYLLIS K
Address: 11426 YORK ROAD, 2ND FLOOR
City-St-Zip: HUNT VALLEY, MD 21030

Title: S
Name: SLATER, LISA R
Address: 11426 YORK ROAD, 2ND FLOOR
City-St-Zip: HUNT VALLEY, MD 21030

Title: TD
Name: FRANK, RONALD A
Address: 11426 YORK ROAD, 2ND FLOOR
City-St-Zip: HUNT VALLEY, MD 21030

Title: D
Name: HACKERMAN, HAROLD I
Address: 100 SOUTH CHARLES STREET, SUITE 1300
City-St-Zip: BALTIMORE, MD 21201

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: KIM MARZULLO

VP

01/23/2012

Electronic Signature of Signing Officer or Director

Date