2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001880

Entity Name: WAUSAU GENERAL INSURANCE COMPANY

FILED Mar 28, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
2000 WESTWOOD DRIVE WAUSAU, WI 54401					
Current Mailing Address:			New Mailing Address:		
2000 WESTWOOD DRIVE WAUSAU, WI 54401					
FEI Number: 3	36-2753986	FEI Number Applied For () FEI Nu	mber Not Appli	cable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 US 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.					
SIGNATUR		c Signature of Registered Agent		 Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	DCEO () KELLY, EDMUN 175 BERKLEY S BOSTON, MA 0	STREET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DVC () GREGG, GARY 175 BERKLEY S BOSTON, MA 0	STREET	Title: Name: Address: City-St-Zip:	CIOD (X) Change () Addition FONTANES, ALEXANDER A 175 BERKLEY STREET BOSTON, MA 02117	
Title: Name: Address: City-St-Zip:	ASVP () LEGG, DEXTER 175 BERKELEY BOSTON, MA 0:	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPS () HOFFERT, J S 2000 WESTWO WAUSAU, WI 5		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MANSFIELD, CH 175 BERKELEY BOSTON, MA 0	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ASEC () BAINTON, DIANE 175 BERKELEY BOSTON, MA 0	STREET	Title: Name: Address: City-St-Zip:	ASEC (X) Change () Addition CIOTTI, KRISTIN K 175 BERKELEY STREET BOSTON, MA 02117	

I hereby certify that the information supplied with this filing does not qualify 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: KRISTIN K. CIOTTI ASEC 03/28/2008