

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05934

FILED
Mar 03, 2011
Secretary of State

Entity Name: ZURICH AMERICAN INSURANCE COMPANY OF ILLINOIS

Current Principal Place of Business:

1400 AMERICAN LANE
CORPORATE LAW
SCHAUMBURG, IL 60196 US

New Principal Place of Business:

Current Mailing Address:

1400 AMERICAN LANE
CORPORATE LAW
SCHAUMBURG, IL 60196 US

New Mailing Address:

FEI Number: 36-2781080 **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: DCEO
Name: FOLEY, MICHAEL
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196 US

Title: DPRE
Name: MUELLER, NANCY
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196 US

Title: SEC
Name: ZITT, COLLEEN
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196 US

Title: DEVP
Name: RAND, STEVEN
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196 US

Title: DEVP
Name: SHARMA, VIBHU
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196 US

Title: EVPS
Name: KERRIGAN, DENNIS F
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196 US

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: DENNIS F KERRIGAN

EVPS

03/03/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date