2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# P07635

Entity Name: XL INSURANCE COMPANY OF NEW YORK, INC.

Current Principal Place of Business:

111 BROADWAY
SUITE 1802
NEW YORK, NY 10006 US

New Principal Place of Business:

Current Mailing Address:

70 SEAVIEW AVE.
STAMFORD, CT 069026040 US

New Mailing Address:

FEI Number: 13-3787296 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: AGOSTA, STEVEN P
Address: 70 SEAVIEW AVE
City-St-Zip: STAMFORD, CT 06902

Title: VT ( ) Delete
Name: CARINO, GABRIEL G
Address: 70 SEAVIEW AVE
City-St-Zip: STAMFORD, CT 069026040

Title: DP ( ) Delete
Name: DUCLOS, DAVID B
Address: 520 EAGLEVIEW BLVD
City-St-Zip: EXTON, PA 19341

Title: DV ( ) Delete
Name: GLANCY, JOHN R
Address: 100 CONSTITUTION PLAZA
City-St-Zip: HARTFORD, CT 06103

Title: DVS ( ) Delete
Name: MEAGHER, KENNETH P
Address: 70 SEAVIEW AVENUE
City-St-Zip: STAMFORD, CT 06902

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change ( ) Addition
Name: DUCLOS, DAVID B
Address: 505 EAGLEVIEW BLVD, SUITE 100
City-St-Zip: EXTON, PA 19341

Title: DP (X) Change ( ) Addition
Name: GLANCY, JOHN R
Address: 100 CONSTITUTION PLAZA
City-St-Zip: HARTFORD, CT 06103

Title: VS (X) Change ( ) Addition
Name: PERKINS, TONI ANN
Address: 70 SEAVIEW AVENUE
City-St-Zip: STAMFORD, CT 06902

Title: DV ( ) Change (X) Addition
Name: HUNTE, ALAN L
Address: 70 SEAVIEW AVENUE
City-St-Zip: STAMFORD, CT 06902

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: TONI ANN PERKINS S 04/08/2009

Electronic Signature of Signing Officer or Director Date