2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2010
Secretary of State

DOCUMENT# P12189

Entity Name: PXRE REINSURANCE COMPANY

Current Principal Place of Business:

379 THORNALL ST
EDISON, NJ 08837 US

New Principal Place of Business:

TWO LOGAN SQUARE
SUITE 600
PHILADELPHIA, PA 19103 US

Current Mailing Address:

379 THORNALL ST
EDISON, NJ 08837 US

New Mailing Address:

TWO LOGAN SQUARE
SUITE 600
PHILADELPHIA, PA 19103 US

FEI Number: 06-1206728 **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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P
Name: MOHN, MARVIN D
Address: TAWA MGMT LTD THE IRIS BLVD 193 MARSH WALL
City-St-Zip: K14 9SG LONDON, LO K14 9SG UK

Title: VP
Name: BYRNE, SIMON LEES BUC
Address: TAWA MGMT LTD THE ISIS BLVD 193 MARSH WALL
City-St-Zip: K14 9SG LONDON, LO K14 9SG UK

Title: C
Name: VAUGHAN, DAVID
Address: TAWA MGMT LTD THE ISIS BLVD 193 MARSH WALL
City-St-Zip: K14 9SG LONDON, LO K14 9SG UK

Title: VP
Name: JOHNSON, SANGEETA
Address: TAWA MGMT LTD THE ISIS BLVD 193 MARSH WALL
City-St-Zip: K14 9SG LONDON, LO K14 9SG UK

Title: SECR
Name: JONES, CHRISTOPHER
Address: TAWA MGMT LTD THE ISIS BLVD 193 MARSH WALL
City-St-Zip: K14 9SG LONDON, LO K14 9SG UK

Title: TREA
Name: BAXTER, STEPHEN
Address: TAWA MGMT LTD THE ISIS BLVD 193 MARSH WALL
City-St-Zip: K14 9SG LONDON, LO K14 9SG UK

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: MARVIN D. MOHN MR. 04/16/2010

Electronic Signature of Signing Officer or Director Date