


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004 8:00 am
Secretary of State

04-15-2004 90023 040 ***150.00

DOCUMENT # P16639 1. Entity Name CENTURY REINSURANCE COMPANY					
Principal Place of Business 1601 CHESTNUT ST, PHILADELPHIA, PA 19103			Mailing Address 1601 CHESTNUT ST, PHILADELPHIA, PA 19103		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 06-0988117	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNSON, BRUNA A 1601 CHESTNUT ST PHILADELPHIA, PA 19103	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JOHNSTON, BRUNA ANNE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAP GOLD, DAVID R 1601 CHESTNUT ST PHILADELPHIA, PA 19103	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Constance D. O'Mara 1601 Chestnut St. Philadelphia, PA 19103	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPT TUTHILL, CAROLYN A 1601 CHESTNUT ST PHILADELPHIA, PA 19103	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Susan A. Chambers 1601 Chestnut St. Philadelphia, PA 19103	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECKER, ALLAN R 1601 CHESTNUT ST PHILADELPHIA, PA 19103	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Mark H. MacQueen 1601 Chestnut St. Philadelphia, PA 19103	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREHM, DANIEL G 1601 CHESTNUT ST PHILADELPHIA, PA 19103	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Shelby Mattioli 1601 Chestnut St. Philadelphia, PA 19103	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIBNEY, EDWARD J 1601 CHESTNUT ST PHILADELPHIA, PA 19103	<input type="checkbox"/> Delete	*SEE ATTACHED LIST OF ADDITIONAL OFFICERS AND DIRECTORS		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Bruna Anne Johnston, Secretary			4/7/04 215-640-2005 <small>Date Daytime Phone #</small>		

Attachment

#P16039

CENTURY REINSURANCE COMPANY

Corporate Profile System
Officer Business Address List
As of - 04/13/2004

Name & Title(s)	Business Address
CONSTANCE DEPYPER OMARA PRESIDENT	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19103
CAROLYN ANN TUTHILL VICE PRESIDENT TREASURER CHIEF FINANCIAL OFFICER	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19103
BRUNA ANNE JOHNSTON SECRETARY	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19103
JOHN MICHAEL BUCKLEY ASSISTANT SECRETARY	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19103
SUSAN ANN CHAMBERS ASSISTANT SECRETARY	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19101

Attachment

#P16039

CENTURY REINSURANCE COMPANY

**Corporate Profile System
Director Business Address List
As of - 04/13/2004**

Name & Title(s)	Business Address
EDWARD JOSEPH GIBNEY MEMBER OF BOARD OF DIRECTORS	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19192
MARK HENDERSON MACQUEEN MEMBER OF EXECUTIVE COMMITTEE MEMBER OF INVESTMENT COMMITTEE MEMBER OF BOARD OF DIRECTORS	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19192
SHELBY MATTIOLI MEMBER OF BOARD OF DIRECTORS	
CONSTANCE DEPYPER OMARA CHAIRMAN OF EXECUTIVE COMMITTEE CHAIRMAN OF INVESTMENT COMMITTEE MEMBER OF BOARD OF DIRECTORS	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19103
CHANDRAKANT CHATURBHAI PATEL MEMBER OF BOARD OF DIRECTORS	TWO LIBERTY PLACE 1601 CHESTNUT STREET PHILADELPHIA, PA 19103

Attachment

P16039

CENTURY REINSURANCE COMPANY

Name & Title(s)

Business Address

Corporate Profile System
Director Business Address List
As of - 04/13/2004

CAROLYN ANN TUTTILL

MEMBER OF EXECUTIVE COMMITTEE

MEMBER OF INVESTMENT COMMITTEE

MEMBER OF BOARD OF DIRECTORS

TWO LIBERTY PLACE
1601 CHESTNUT STREET
PHILADELPHIA, PA 19103

THOMAS JOHN WAMSER

MEMBER OF BOARD OF DIRECTORS

TWO LIBERTY PLACE
1601 CHESTNUT STREET
PHILADELPHIA, PA 19103