


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90073 039 ***150.00

DOCUMENT # P25360		
1. Entity Name NOVA CASUALTY COMPANY		

Principal Place of Business 180 OAK ST. BUFFALO, NY 14203 US	Mailing Address 180 OAK ST. BUFFALO, NY 14203 US
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2. Principal Place of Business 726 Exchange St. Suite, Apt. #, etc. Suite 1020 City & State Buffalo NY Zip 14210 Country US	3. Mailing Address 726 Exchange St. Suite, Apt. #, etc. Suite 1020 City & State Buffalo NY Zip 14210 Country US
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01192006 Chg-P CR2E034 (11/05)

4. FEI Number 16-1140177	Applied For <input type="checkbox"/> Not Applicable
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	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDP ERNST, NORMAN F JR 21 GREENWOOD DRIVE ORCHARD PARK, NY 14127 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Robert L. Frailey 726 Exchange St #1020 Buffalo NY 14210 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT HOOVER, CHRISTOPHER C 6663 E. EDEN ROAD HAMBURG, NY 14075 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Christopher C. Hoover 726 Exchange St #1020 Buffalo NY 14210 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RAPPAPORT, CRAIG M 46 SILENT MEADOW ORCHARD PARK, NY 14127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Craig M. Rappaport 726 Exchange St #1020 Buffalo NY 14210 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WARREN, SEIFERT B 35 CAROLINE LANE ELMA, NY 14059 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Warren B. Seifert 726 Exchange St #1020 Buffalo NY 14210 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WAHLSTROM, EUGENE 2151 NW 96TH ST. TERR. APT. 1 PENBROKE PINES, FL 33024 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gordon R. Gross 465 Main St Buffalo NY 14203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V [Blank] <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William N. Hudson 237 Main St #600 Buffalo NY 14203 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: DA C. Hagan 5/2/06 716.856.3242
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
<p style="text-align: right;">__Delete</p> <p>Title: Name: Street Address: City/St/Zip</p>	<p style="text-align: right;">__Change X_Addition</p> <p>Title: D Name: Paul A. Palmer Street Address: 521 5th Ave. City/St/Zip: New York, NY 10175</p>
<p style="text-align: right;">__Delete</p> <p>Title: Name: Street Address: City/St/Zip</p>	<p style="text-align: right;">__Change X_Addition</p> <p>Title: V/D Name: Ronald A. Ganaitis Street Address: 2 Waterside Dr. City/St/Zip: Windsor, CT 06095</p>
<p style="text-align: right;">__Delete</p> <p>Title: Name: Street Address: City/St/Zip</p>	<p style="text-align: right;">__Change X_Addition</p> <p>Title: V/D Name: Mark A. Green Street Address: 2 Waterside Dr. City/St/Zip: Windsor, CT 06095</p>
<p style="text-align: right;">__Delete</p> <p>Title: Name: Street Address: City/St/Zip</p>	<p style="text-align: right;">__Change X_Addition</p> <p>Title: V/D Name: Ronald C. Mairano Street Address: 2 Waterside Dr. City/St/Zip: Windsor, CT 06095</p>
<p style="text-align: right;">__Delete</p> <p>Title: Name: Street Address: City/St/Zip</p>	<p style="text-align: right;">__Change X_Addition</p> <p>Title: D Name: Richard D. Federico Street Address: 2 Waterside Dr. City/St/Zip: Windsor, CT 06095</p>
<p style="text-align: right;">__Delete</p> <p>Title: Name: Street Address: City/St/Zip</p>	<p style="text-align: right;">__Change X_Addition</p> <p>Title: V/D Name: Russell J. Renvyle Street Address: 2 Waterside Dr. City/St/Zip: Windsor, CT 06095</p>
<p style="text-align: right;">__Delete</p> <p>Title: Name: Street Address: City/St/Zip</p>	<p style="text-align: right;">__Change X_Addition</p> <p>Title: V/D Name: Robert D. Schultz Street Address: 2 Waterside Dr. City/St/Zip: Windsor, CT 06095</p>
<p style="text-align: right;">__Delete</p> <p>Title: Name: Street Address: City/St/Zip</p>	<p style="text-align: right;">__Change X_Addition</p> <p>Title: PD Name: Stephen M. Mulready Street Address: 2 Waterside Dr. City/St/Zip: Windsor, CT 06095</p>

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