

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25459

FILED
Apr 04, 2012
Secretary of State

Entity Name: EXCALIBUR REINSURANCE CORPORATION

Current Principal Place of Business:

1735 MARKET STREET SUITE 3000
PHILADELPHIA, PA 191037590 US

New Principal Place of Business:

1880 JFK BOULEVARD
SUITE 801
PHILADELPHIA, PA 19103 US

Current Mailing Address:

1735 MARKET STREET SUITE 3000
PHILADELPHIA, PA 191037590 US

New Mailing Address:

1880 JFK BOULEVARD
SUITE 801
PHILADELPHIA, PA 19103 US

FEI Number: 23-2153760

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: PRES
Name: BARKER, KATHERINE H PRES
Address: 1880 JFK BOULEVARD, SUITE 801
City-St-Zip: PHILADELPHIA, PA 19103

Title: VP,C
Name: MAHON, TIMOTHY J VP,C
Address: 1880 JFK BOULEVARD, SUITE 801
City-St-Zip: PHILADELPHIA, PA 19103 US

Title: SEC
Name: WILLIAMS, WENDY SEC
Address: 1880 JFK BOULEVARD, SUITE 801
City-St-Zip: PHILADELPHIA, PA 19103

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: TIMOTHY J. MAHON

VP,C

04/04/2012

Electronic Signature of Signing Officer or Director

Date