

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40325

FILED
Apr 02, 2010
Secretary of State

Entity Name: UNITED FINANCIAL CASUALTY COMPANY

Current Principal Place of Business:

6300 WILSON MILLS RD.
CLEVELAND, OH 441432182 US

New Principal Place of Business:

6300 WILSON MILLS ROAD
MAYFIELD VILLAGE, OH 44143 US

Current Mailing Address:

6300 WILSON MILLS RD.
CLEVELAND, OH 441432182 US

New Mailing Address:

6300 WILSON MILLS ROAD
MAYFIELD VILLAGE, OH 44143 US

FEI Number: 36-3298008

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: PDE
Name: BISSLER, MICHAEL W
Address: 6300 WILSON MILLS ROAD
City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

Title: SEC
Name: CORWIN, PATRICIA M
Address: 6300 WILSON MILLS ROAD
City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

Title: TD
Name: BARBAGALLO, JOHN A
Address: 6300 WILSON MILLS ROAD
City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

Title: VPD
Name: BERNER, PATRICIA O
Address: 6300 WILSON MILLS ROAD
City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

Title: DVP
Name: KAMPF, WILLIAM R
Address: 6300 WILSON MILLS ROAD
City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

Title: DT
Name: MAHER, KEVIN P
Address: 6300 WILSON MILLS ROAD
City-St-Zip: MAYFIELD VILLAGE, OH 44143 US

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: ANNE MEYER

POA

04/02/2010

Electronic Signature of Signing Officer or Director

Date