

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000020700

FILED
Jan 06, 2012
Secretary of State

Entity Name: OCEAN HARBOR CASUALTY INSURANCE COMPANY

Current Principal Place of Business:

2549 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

2549 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308 US

New Mailing Address:

FEI Number: 31-1648474 **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 EAST 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: DPT
Name: ROCHE, WILLIAM E
Address: ONE PENN PLAZA, SUITE 4409
City-St-Zip: NEW YORK, NY 10119 US

Title: D,S
Name: ERICKSON, DONNA M
Address: ONE PENN PLAZA, SUITE 4409
City-St-Zip: NEW YORK, NY 10119 US

Title: D,V
Name: MILO, PHILIP J
Address: ONE PENN PLAZA, SUITE 4409
City-St-Zip: NEW YORK, NY 10119 US

Title: D
Name: MILO, RALPH
Address: 7771 FISHER ISLAND DRIVE
City-St-Zip: FISHER ISLAND, FL 33109 US

Title: D
Name: MAUNDRELL, III, DAVID J
Address: 28 OLD FULTON STREET, APT. 8C
City-St-Zip: BROOKLYN, NY 11201 US

Title: V
Name: EIGEN, MICHAEL K
Address: ONE PENN PLAZA, SUITE 4409
City-St-Zip: NEW YORK, NY 10119 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: DONNA M. ERICKSON

D, S

01/06/2012

Electronic Signature of Signing Officer or Director

Date