

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 839780

FILED
May 05, 2020
Secretary of State
9896658155CC

Entity Name: TRAVELERS CASUALTY INSURANCE COMPANY OF AMERICA

Current Principal Place of Business:

ONE TOWER SQUARE
HARTFORD, CT 06183

Current Mailing Address:

ONE TOWER SQUARE
HARTFORD, CT 06183 US

FEI Number: 06-0876835

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES STREET
TALLAHASSEE, FL 32399-0000 US

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

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name SEMINARA, NICHOLAS
Address ONE TOWER SQUARE
City-State-Zip: HARTFORD CT 06183

Title DIRECTOR, CFO
Name FREY, DANIEL S.
Address ONE TOWER SQUARE
City-State-Zip: HARTFORD CT 06183

Title DIRECTOR, VC
Name HEYMAN, WILLIAM H
Address 485 LEXINGTON AVENUE, SUITE 400
City-State-Zip: NEW YORK NY 10017-2630

Title ASSISTANT CORPORATE SECRETARY
Name MULCAHY, ANN B.
Address ONE TOWER SQUARE
City-State-Zip: HARTFORD CT 06183

Title CORPORATE SECRETARY
Name SKJERVEN, WENDY C
Address 385 WASHINGTON STREET
City-State-Zip: ST. PAUL MN 55102

Title TREASURER
Name RUSSELL, DOUGLAS K.
Address ONE TOWER SQUARE
City-State-Zip: HARTFORD CT 06183

Title DIRECTOR, EXECUTIVE VICE PRESIDENT, GENERAL COUNSEL
Name KALLA, CHRISTINE K.
Address 385 WASHINGTON STREET
City-State-Zip: ST. PAUL MN 55102

Title DIRECTOR
Name TOCZYDLOWSKI, GREGORY C.
Address ONE TOWER SQUARE
City-State-Zip: HARTFORD CT 06183

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: WENDY C. SKJERVEN

SECRETARY

05/05/2020

Electronic Signature of Signing Officer/Director Detail

Date