## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 853328

### Entity Name: TRAVELERS COMMERCIAL CASUALTY COMPANY

### Current Principal Place of Business:

ONE TOWER SQUARE HARTFORD, CT 06183

## **Current Mailing Address:**

ONE TOWER SQUARE HARTFORD, CT 06183 US

## FEI Number: 95-3634110

### Name and Address of Current Registered Agent:

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

Certificate of Status Desired: No

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

## Officer/Director Detail :

	Title	DIRECTOR, PRESIDENT, CHAIRMAN, CEO	Title	DIRECTOR, VC, CFO
	Name	MACLEAN, BRIAN W	Name	BENET, JAY S
			Address	ONE TOWER SQUARE
	Address	ONE TOWER SQUARE	City-State-Zip:	HARTFORD CT 06183
	City-State-Zip:	HARTFORD CT 06183		
	Title	DIRECTOR, VC, CHIEF INVESTMENT	Title	ASSISTANT CORPORATE SECRETARY
		OFFICER	Name	MULCAHY, ANN B.
	Name	HEYMAN, WILLIAM H	Address	ONE TOWER SQUARE
	Address	485 LEXINGTON AVENUE, SUITE 400	City-State-Zip:	HARTFORD CT 06183
	City-State-Zip:	NEW YORK NY 10017-2630	,	
	Title	CORPORATE SECRETARY	Title	TREASURER, EXECUTIVE VICE PRESIDENT
	Name	SKJERVEN, WENDY C	Name	OLIVO, MARIA
	Address	385 WASHINGTON STREET	Address	485 LEXINGTON AVENUE, SUITE 400
	City-State-Zip:	ST. PAUL MN 55102	City-State-Zip:	NEW YORK NY 10017-2630
	Title	DIRECTOR, EXECUTIVE VICE	Title	DIRECTOR
		PRESIDENT, GENERAL COUNSEL	Name	TOCZYDLOWSKI, GREGORY C.
	Name	SPENCE, KENNETH F. III	Address	ONE TOWER SQUARE
	Address	385 WASHINGTON STREET	City-State-Zip:	HARTFORD CT 06183
	City-State-Zip:	ST. PAUL MN 55102	- , <u>-</u> .p.	

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: ANN B. MULCAHY

ASSISTANT CORPORATE 03/22/2017 SECRETARY

Electronic Signature of Signing Officer/Director Detail

# FILED Mar 22, 2017 Secretary of State CC3338912133

Date