## 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001520

Entity Name: MONTPELIER UNDERWRITING, INC.

**Current Principal Place of Business:** 

ONE CONSTITUTION PLAZA

**5TH FLOOR** 

HARTFORD, CT 06103

**Current Mailing Address:** 

ONE CONSTITUTION PLAZA

5TH FLOOR

HARTFORD, CT 06103

FEI Number: 20-8862477 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 515 E. PARK AVENUE TALLAHASSEE, FL 32301 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

**FILED** Mar 25, 2013

**Secretary of State** 

CC5865526724

Officer/Director Detail:

Title D Title S, D

CHATTOCK, RICHARD KIM. JONATHAN B Name Name

Address **85 GRACECHURCH STREET** Address MONTPELIER HOUSE, 94 PITTS BAY

7TH FLOOR **ROAD** 

LONDON EC3V OAA PEMBROKE HM 08 City-State-Zip: City-State-Zip:

Title Title **PRES** 

HARRIS, CHRISTOPHER L DALTON, JOHN Name Name

94 PITTS BAY ROAD ONE CONSTITUTION PLAZA Address Address

5TH FLOOR PEMBROKE HM 08 City-State-Zip:

City-State-Zip: HARTFORD CT 06103

Title AS

Title Т KIENE, ALLISON Name

STURDEVANT, MARK ONE CONSTITUTION PLAZA, 5TH Address

300 TRADE CENTER, SUITE 2610 Address **FLOOR** 

Name

City-State-Zip: WOBURN MA 01801 HARTFORD CT 06103 City-State-Zip:

**DIRECTOR** Title

Name PAQUETTE. MICHAEL

4 CURRIER PLACE Address

SUITE 302

City-State-Zip: HANOVER NH 03755

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.

03/25/2013 ASSISTANT SECRETARY SIGNATURE: ALLISON KIENE

Electronic Signature of Signing Officer/Director Detail

Date