2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004841

Entity Name: UNITED STATES LIABILITY INSURANCE COMPANY

FILED Apr 28, 2016 Secretary of State CC4360910078

Current Principal Place of Business:

1190 DEVON PARK DRIVE WAYNE. PA 19087-2150

Current Mailing Address:

1190 DEVON PARK DRIVE P O BOX 6700 WAYNE. PA 19087-8700 US

FEI Number: 23-1383313 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

709 PEACH TREE DRIVE

CHIEF FINANCIAL OFFICER 200 E. GAINES ST 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:

Name

Address

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIRMAN, PRESIDENT, CEO Title EXECUTIVE VICE PRESIDENT,

NERNEY, THOMAS PATRICK DIRECTOR

Name PALMA, SHELLEY LAURICE Address 400 INVERARAY ROAD

Address 19 WELLFLEET LANE

City-State-Zip: VILLANOVA PA 19085

City-State-Zip: WAYNE PA 19087

Title EXECUTIVE VICE PRESIDENT,
TREASURER DIRECTOR Title EXECUTIVE VP, SECRETARY,

TREASURER, DIRECTOR

TITLE

EXECUTIVE VP, SECRE

DIRECTOR

Name RIVITUSO, LOUIS FRANCIS Name PETERSEN, JOHN RICHARD JR.

Address 914 DOLPHIN DRIVE

City-State-Zip: WEST CHESTER PA 19380 City-State-Zip: MALVERN PA 19355

Title EXECUTIVE VICE PRESIDENT Title PRESIDENT, CUSTOMER

DIRECTOR DISTRIBUTION, DIRECTOR

Name DUDA, DIANE SYMNOSKI Name SNYDER, THOMAS CHRISTOPHER

Address 1616 CLEARBROOK ROAD Address 521 COLFELT COURT

City-State-Zip: LANSDALE PA 19446 City-State-Zip: EXTON PA 19341

Title EXECUTIVE VP, DIRECTOR Title EXECUTIVE VP, DIRECTOR

Name KUESEL TRAYNOR, LISA KATHLEEN Name CARBALLO, JACK THOMAS

Address 33 MEADOW CREEK LANE Address 1245 GORDON ROAD

City-State-Zip: MALVERN PA 19355 City-State-Zip: JENKINTOWN PA 19046

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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: LOUIS F. RIVITUSO EVP TREASURER & CFO 04/28/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title PRESIDENT, PROPERTY AND CASUALTY Title PRESIDENT, SPECIALTY LINES

DIVISION, DIRECTOR DIVISION, DIRECTOR

Name MAUER, REINER RALF Name MITALA, ANDREW MICHAEL

Address 214 EAST SIXTH STREET Address 119 BENNINGTON ROAD

City-State-Zip: EAST GREENVILLE PA 18041 City-State-Zip: PHOENIXVILLE PA 19460

Title SENIOR VP, DIRECTOR

Name DONAHUE, JOHN GERALD JR.

Address 201 CARRIAGE LANE

City-State-Zip: NEWTON SQUARE PA 19073