

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004841

Entity Name: UNITED STATES LIABILITY INSURANCE COMPANY**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:** No**Name and Address of Current Registered Agent:**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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN, PRESIDENT, CEO
Name NERNEY, THOMAS PATRICK
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

Title EXECUTIVE VICE PRESIDENT,
DIRECTOR
Name ADDIEGO, MARK ANTHONY
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

Title PRESIDENT, SPECIALTY LINES
DIVISION, DIRECTOR
Name MITALA, ANDREW MICHAEL
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

Title EXECUTIVE VICE PRESIDENT,
DIRECTOR
Name MOUL, SASHA DUNDI
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

Title EXECUTIVE VICE PRESIDENT,
CONTROLLER, TREASURER,
DIRECTOR

Name RIVITUSO, STEVEN JOHN
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

Title PRESIDENT, CUSTOMER
DISTRIBUTION, DIRECTOR
Name SNYDER, THOMAS CHRISTOPHER
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

Title EXECUTIVE VICE PRESIDENT,
SECRETARY, DIRECTOR
Name REILEY, LAUREN ANNE
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

Title EXECUTIVE VICE PRESIDENT
Name SCALISE, JAMES WILLIAM
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

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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: STEVEN J. RIVITUSO**EVP CONTROLLER
TREASURER****04/27/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title EXECUTIVE VICE PRESIDENT
Name MURRAY, CHRISTINE HELLWIG
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150

Title EXECUTIVE VICE PRESIDENT
Name SPENCE, DONALD HOFFMAN
Address 1190 DEVON PARK DRIVE
City-State-Zip: WAYNE PA 19087-2150