2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 804275

Entity Name: TIG INSURANCE COMPANY

Current Principal Place of Business:

250 COMMERCIAL STREET

SUITE 5000

MANCHESTER, NH 03101

Current Mailing Address:

250 COMMERCIAL STREET

SUITE 5000

MANCHESTER, NH 03101 US

FEI Number: 94-1517098 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Mar 18, 2015

Secretary of State

CC3311486434

Officer/Director Detail:

Title DIRECTOR, PRESIDENT, CEO Title DIRECTOR, CFO, TREASURER, SVP

Name BENTLEY, NICHOLAS C Name BATOR, JOHN J

Address 250 COMMERCIAL STREET, STE 5000 Address 250 COMMERCIAL STREET, STE 5000

City-State-Zip: MANCHESTER NH 03101 City-State-Zip: MANCHESTER NH 03101

Title D, SVP Title D, GC, SVP

Name DEMARIA, FRANK Name FABIAN, RICHARD J

Address 250 COMMERCIAL STREET, STE 5000 Address 250 COMMERCIAL STREET, STE 5000

City-State-Zip: MANCHESTER NH 03101 City-State-Zip: MANCHESTER NH 03101

Title SECRETARY, VP Title DIRECTOR, SVP
Name SCOTT, SHERRYL Name CAROSELLI, NINA L

Address 250 COMMERCIAL STREET, STE 5000 Address 250 COMMERCIAL STREET

SUITE 5000

City-State-Zip: MANCHESTER NH 03101 City-State-Zip: MANCHESTER NH 03101

Title SVP Title SVP

Name EDMISTON, HENRY W Name KELLY, JAMES K

Address 2850 LAKE VISTA DRIVE, SUITE 150 Address 250 COMMERCIAL STREET

SUITE 5000

City-State-Zip: MANCHESTER NH 03101

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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: SHERRYL SCOTT

LEWISVILLE TX 75067

ASSISTANT SECRETARY

03/18/2015 Date

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued:

Title VP

Name BROWN, CRAIG

Address 250 COMMERCIAL STREET

SUITE 5000

City-State-Zip: MANCHESTER NH 03101

Title VP

Name IRVINE, JEAN T

Address 250 COMMERCIAL STREET

SUITE 5000

City-State-Zip: MANCHESTER NH 03101

Title VP

Name SAMPSON, ROBERT J

Address 250 COMMERCIAL STREET

SUITE 5000

City-State-Zip: MANCHESTER NH 03101

Title VP, CHIEF ACTUARY
Name KUNISH, MATTHEW W

Address 250 COMMERCIAL STREET

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City-State-Zip: MANCHESTER NH 03101

Title VP

Name TOWNSEND II, WILSON

Address 250 COMMERCIAL STREET

SUITE 5000

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Title VP

Name WESTOVER, MICHAEL G

Address 250 COMMERCIAL STREET

SUITE 5000

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Title ASST. VP

Name ALVINO, GINAMARIE

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SUITE 5000

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Title ASST. VP

Name CLIFFORD, BRENDAN M

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Title ASST. VP

Name HOWARD, KIM R

Address 250 COMMERCIAL STREET

SUITE 5000

City-State-Zip: MANCHESTER NH 03101

Title ASST. VP

Name LEMIRE, MAUREEN

Title VP

Name HINSON, GARY L

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City-State-Zip: MANCHESTER NH 03101

Title VP

Name KANT, ROBERT S

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Title VP

Name BANNISTER, MARK J

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Title VP

Name SIEGART, JOHN R

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Title VP

Name WEIKERS, ANN

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Title VP

Name ZAMPELLA, JOSEPH

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Title ASST. VP

Name BRYANT, MICHAEL J

Address 250 COMMERCIAL STREET

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Title ASST. VP

Name DONLON, TIMOTHY

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Title ASST. VP

Name LARRABEE, BRYCE A

Address 250 COMMERCIAL STREET

SUITE 5000

City-State-Zip: MANCHESTER NH 03101

Title ASST. VP

Name OWEN, MICHAEL S

250 COMMERCIAL STREET SUITE 5000 Address

MANCHESTER NH 03101 City-State-Zip:

Title ASST. CONTROLLER BUTCHARD, MARLENE Name

250 COMMERCIAL STREET Address

SUITE 5000

City-State-Zip: MANCHESTER NH 03101

Title ASST. SECRETARY, VP WHITAKER, DOROTHY D Name Address 2850 LAKE VISTA DRIVE

SUITE 150

City-State-Zip: LEWISVILLE TX 75067

250 COMMERCIAL STREET Address

SUITE 5000

MANCHESTER NH 03101 City-State-Zip:

Title ASST. SECRETARY SPENCER, MELODY Name

Address 2850 LAKE VISTA DRIVE, SUITE 150

City-State-Zip: LEWISVILLE TX 75067