

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 820958

FILED  
Apr 05, 2011  
Secretary of State

**Entity Name:** ELECTRIC INSURANCE COMPANY

**Current Principal Place of Business:**

75 SAM FONZO DRIVE  
BEVERLY, MA 01915

**New Principal Place of Business:**

75 SAMFONZO DRIVE  
BEVERLY, MA 01915

**Current Mailing Address:**

75 SAM FONZO DRIVE  
BEVERLY, MA 01915

**New Mailing Address:**

75 SAMFONZO DRIVE  
BEVERLY, MA 01915

FEI Number: 04-2422119

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VDS  
Name: GREENBAUM, DAVID M  
Address: 75 SAM FONZO DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: PCD  
Name: MEICHES, MARC A  
Address: 75 SAM FONZO DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: V  
Name: KOURY, KIMBERLY  
Address: 75 SAM FONZO DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: T  
Name: MCGRATH, MARIA B  
Address: 75 SAM FONZO DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: AS  
Name: WILSON, ERICA H  
Address: 75 SAM FONZO DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: V  
Name: MURRAY, DEAN L  
Address: 75 SAM FONZO DRIVE  
City-St-Zip: BEVERLY, MA 01915

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: ERICA H. WILSON

AS

04/05/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date