

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90352 023 \*\*\*150.00

DOCUMENT # **820958** ✓

1. Entity Name

Electric Insurance Company

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**152 Conant Street**

3. Mailing Address  
**152 Conant Street**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Beverly, MA**

City & State  
**Beverly, MA**

4. FEI Number  
**04-2422119**

Applied For  
Not Applicable

Zip  
**01915**

Country  
**USA**

Zip  
**01915**

Country  
**USA**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Florida Insurance Commissioner**

Street Address (P.O. Box Number is Not Acceptable)  
**Capitol Building**

City **Tallahassee** **FL** **32304**

8. 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

Signature of officer or director of registered agent or filer if applicable

(NOTE: Registered Agent Signature required unless first filed)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1 Fee is \$150.00**  
**After May 1 Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

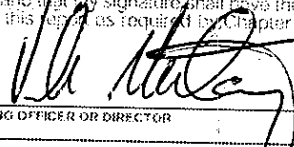
11. OFFICERS AND DIRECTORS

See attached list for all  
Officers and Directors.

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Virginia A. McCarthy**



4-25-02

978-524-5249

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone Number

ATTACHMENT 820958/

658227

04/29/02

**ELECTRIC INSURANCE COMPANY**

**DIRECTORS**

DAVID F. ST. LAURENT, CHAIRMAN  
LAURENCE J. COHEN  
MICHAEL G. CRASNICK  
DENNIS J. DOUGHERTY  
ANGELO C. RENNA  
DAVID M. GREENBAUM  
GERARD P. MCCARTHY

**OFFICERS**

DAVID F. ST. LAURENT	PRESIDENT AND CHIEF EXECUTIVE OFFICER
DOMINICK A. CIPOLLA	VICE PRESIDENT - CALL CENTER OPERATIONS & QUALITY/TRAINING
LAURENCE J. COHEN	VICE PRESIDENT - FINANCE & ADMINISTRATION, TREASURER AND CHIEF FINANCIAL OFFICER
MICHAEL G. CRASNICK	VICE PRESIDENT - COMMERCIAL LINES UNDERWRITING, CHIEF COMPLIANCE OFFICER AND CHIEF UNDERWRITING OFFICER
DENNIS J. DOUGHERTY	VICE PRESIDENT - HUMAN RESOURCES AND CHIEF HUMAN RESOURCES OFFICER
DAVID M. GREENBAUM	VICE PRESIDENT - GENERAL COUNSEL AND CHIEF LEGAL OFFICER
MAUREEN A. HEGARTY	VICE PRESIDENT - PERSONAL LINES CLAIMS
DEAN L. MURRAY	VICE PRESIDENT - WORKERS' COMPENSATION
GERARD P. MCCARTHY	VICE PRESIDENT - PERSONAL LINES UNDERWRITING & PRICING
TENA M. MICHEL	VICE PRESIDENT - MARKETING & NEW BUSINESS DEVELOPMENT
ANGELO C. RENNA	VICE PRESIDENT - INFORMATION TECHNOLOGY
VIRGINIA A. MCCARTHY	ASSOCIATE GENERAL COUNSEL, SECRETARY AND CLERK
KIM A. PERRY	ASSISTANT TREASURER
ELLEN S. ROBBINS	ASSISTANT SECRETARY AND ASSISTANT CLERK

**The mailing address for all Officers and Directors is:**

**152 Conant St.  
Beverly, MA 01915**