

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001945

Entity Name: MAIDEN REINSURANCE COMPANY

FILED
Jan 23, 2013
Secretary of State
CC1335629959

Current Principal Place of Business:

6000 MIDLANTIC DRIVE
SUITE 200 SOUTH
MOUNT LAUREL, NJ 08054

Current Mailing Address:

6000 MIDLANTIC DRIVE
SUITE 200 SOUTH
MOUNT LAUREL, NJ 08054

FEI Number: 43-1898350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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 PD
Name SCHMITT, KAREN L
Address 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH
City-State-Zip: MOUNT LAUREL NJ 08054

Title TD
Name HAWK, PAUL WJR.
Address 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH
City-State-Zip: MOUNT LAUREL NJ 08054

Title SD
Name METZ, LAWRENCE F
Address 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH
City-State-Zip: MOUNT LAUREL NJ 08054

Title D
Name BRUNETTE, CHERYL
Address 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH
City-State-Zip: MOUNT LAUREL NJ 08054

Title D
Name HIGHET, THOMAS H
Address 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH
City-State-Zip: MOUNT LAUREL NJ 08054

Title D
Name HAVERON, PATRICK
Address 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH
City-State-Zip: MOUNT LAUREL NJ 08054

Title DIRECTOR
Name ADAMS, DAVID
Address 6000 MIDLANTIC DRIVE SUITE 200 SOUTH
City-State-Zip: MOUNT LAUREL NJ 08054

Title DIRECTOR
Name MUIR, DOROTHY
Address 6000 MIDLANTIC DRIVE SUITE 200 SOUTH
City-State-Zip: MOUNT LAUREL NJ 08054

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: CHERYL BRUNETTE

ASSISTANT SECRETARY 01/23/2013

Electronic Signature of Signing Officer/Director Detail

Date