

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000001945

**FILED**  
**Nov 30, 2010**  
**Secretary of State**

**Entity Name:** MAIDEN REINSURANCE COMPANY

**Current Principal Place of Business:**

6000 MIDLANTIC DRIVE  
SUITE 200  
MOUNT LAUREL, NJ 08054

**New Principal Place of Business:**

6000 MIDLANTIC DRIVE  
SUITE 200 SOUTH  
MOUNT LAUREL, NJ 08054

**Current Mailing Address:**

6000 MIDLANTIC DRIVE  
SUITE 200  
MOUNT LAUREL, NJ 08054

**New Mailing Address:**

6000 MIDLANTIC DRIVE  
SUITE 200 SOUTH  
MOUNT LAUREL, NJ 08054

**FEI Number:** 43-1898350

**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 32399 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: PAUL HAWK

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHMITT, KAREN L  
Address: 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH  
City-St-Zip: MOUNT LAUREL, NJ 08054

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

Title: SD  
Name: QUINLAN, JOHN J IV  
Address: 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH  
City-St-Zip: MOUNT LAUREL, NJ 08054

Title: D  
Name: COOPER, NATHANIEL  
Address: 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH  
City-St-Zip: MOUNT LAUREL, NJ 08054

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

Title: D  
Name: MARSHALECK, JOHN M  
Address: 6000 MIDLANTIC DRIVE, SUITE 200 SOUTH  
City-St-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 A BRUNETTE

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

ASEC

11/30/2010

\_\_\_\_\_  
Date