

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003227

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** ARCH EXCESS & SURPLUS INSURANCE COMPANY

**Current Principal Place of Business:**

ONE LIBERTY PLAZA  
53RD FLOOR  
NY, NY 10006

**New Principal Place of Business:**

**Current Mailing Address:**

300 PLAZA THREE, 3RD FLOOR  
JERSEY CITY, NJ 07311

**New Mailing Address:**

**FEI Number:** 06-1521582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PD  
Name: LYONS, MARK D  
Address: 300 PLAZA THREE, 3RD FLOOR  
City-St-Zip: JERSEY CITY, NJ 07311

Title: VD  
Name: BRAND, DENNIS R  
Address: 300 PLAZA THREE, 3RD FLOOR  
City-St-Zip: OMAHA, NE 68145

Title: DS  
Name: NILSEN, MARTIN J  
Address: 300 PLAZA THREE, 3RD FLOOR  
City-St-Zip: JERSEY CITY, NJ 07311

Title: AS  
Name: GILLIGAN, MELISSA B ASST.  
Address: 300 FIRST STAMFORD PLACE 5TH FL  
City-St-Zip: STAMFORD, CT 06902

Title: TD  
Name: AHERN, THOMAS J  
Address: 300 PLAZA THREE, 3RD FLOOR  
City-St-Zip: JERSEY CITY, NJ 07311

Title: V  
Name: LABELL, JOSEPH S  
Address: 300 FIRST STAMFORD PLACE 5TH FL  
City-St-Zip: STAMFORD, CT 06902

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: MELISSA B. GILLIGAN

AS

01/05/2011

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

\_\_\_\_\_ Date