2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26492

Entity Name: HCC INSURANCE COMPANY

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
ATTN: LE	RTHWEST FV GAL DEPT. N, TX 77040	VY.				
Current Mailing Address:			New Mailir	New Mailing Address:		
ATTN: LE	RTHWEST FV GAL DEPT. N, TX 77040	VY.				
FEI Number	: 35-1452868	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and	l Address of (Current Registered Agent:	Name and	Address of New Registered Agent:		
P O BOX 6 200 E. GA TALLAHAS The above	SSEE, FL 323	200) 990000 US	rpose of changing it	ts registered office or registered agent, or both,		
SIGNATUI		nic Signature of Registered Agen	 	Date		
Election Car		g Trust Fund Contribution ().	L	Date		
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	DP (SCHELL, MICH 13403 NORTH HOUSTON, TX	WEST FWY.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	DV (ELLIS, EDWAF 13403 NW FRI HOUSTON, TX	EEWAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S (SIMMONS, JAI 13403 NW FRI HOUSTON, TX	EEWAY	Title: Name: Address: City-St-Zip:	VS (X) Change () Addition SIMMONS, JAMES L 13403 NW FREEWAY HOUSTON, TX 77040		
Title: Name: Address: City-St-Zip:	DCFO (MACDONOUGI 13403 NW FRI HOUSTON, TX	EEWAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	PAUL, STEPHE	AN ST., STE 2700	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VT (OJHA, HAMEN 13403 NW FRI HOUSTON, TX	EEWAY.	Title: Name: Address: City-St-Zip:	()Change()Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES L SIMMONS

VS

01/20/2009