

1.) CORPORATION NAME:

DUE DATE: **12/30/2010**

**NORTHERN INSURANCE COMPANY OF NEW YORK**

SCC ID NO: **F0020943**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
11 S 12TH ST  
PO BOX 1463**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,562

**RICHMOND, VA 23218**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NY**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1400 AMERICAN LANE

CITY/ST/ZIP: SCHAUMBURG, IL 60196-1056

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	NANCY D MUELLER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1400 AMERICAN LANE		
CITY/ST/ZIP/CO:	SCHAUMBURG, IL 60196-		
NAME:	DENNIS F KERRIGAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP/CORP SEC		
ADDRESS:	1400 AMERICAN LANE		
CITY/ST/ZIP/CO:	SCHAUMBURG, IL 60196-		
NAME:	BARRY PAUL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1400 AMERICAN LN		
CITY/ST/ZIP/CO:	SCHAUMBURG, IL 60196-		
NAME:	MICHAEL T FOLEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO/CHAIRMAN		
ADDRESS:	1400 AMERICAN LANE		
CITY/ST/ZIP/CO:	SCHAUMBURG, IL 60196-		
NAME:	VIBHU SHARMA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP/CFO		
ADDRESS:	1400 AMERICAN LANE		
CITY/ST/ZIP/CO:	SCHAUMBURG, IL 60196-		

NAME: TY R SAGALOW TITLE: SR VP ADDRESS: ONE LIBERTY PLAZA, 165 BROADWAY, 32ND FLOOR CITY/ST/ZIP/CO: NEW YORK, NY 10006-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: CHRISTINE THEROS-MULLINS TITLE: SR VP ADDRESS: 1400 AMERICAN LANE CITY/ST/ZIP/CO: SCHAUMBURG, IL 60196-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ DENNIS F KERRIGAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DENNIS F KERRIGAN, EVP/CORP SEC PRINTED NAME AND CORPORATE TITLE	11/5/2010 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.