

1.) CORPORATION NAME:

DUE DATE: **11/30/2011**

STATE AUTOMOBILE MUTUAL INSURANCE COMPANY

SCC ID NO: **F0043093**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI C T CORPORATION SYSTEM 4701 COX ROAD, SUITE 301 GLEN ALLEN, VA 23060**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
NORFOLK CITY

4.) STATE OR COUNTRY OF INCORPORATION:
OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 518 EAST BROAD STREET

CITY/ST/ZIP: COLUMBUS, OH 43215-3976

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: ROBERT P RESTREPO JR
TITLE: P/CEO
ADDRESS: 518 EAST BROAD ST
CITY/ST/ZIP/CO: COLUMBUS, OH 43215-3976

OFFICER DIRECTOR

NAME: CLYDE H FITCH
TITLE: CSO
ADDRESS: 518 E BROAD STREET
CITY/ST/ZIP/CO: COLUMBUS, OH 43215-3976

OFFICER DIRECTOR

NAME: DENNIS R BLANK
TITLE: DIRECTOR
ADDRESS: 15078 HARBOR POINT WEST
CITY/ST/ZIP/CO: THORNVILLE, OH 43076-

OFFICER DIRECTOR

NAME: PAUL J OTTE
TITLE: DIRECTOR
ADDRESS: 201 S GRANT ST
CITY/ST/ZIP/CO: COLUMBUS, OH 43215-

OFFICER DIRECTOR

NAME: ALISON COOLBRITH
TITLE: DIRECTOR
ADDRESS: 19 SCHUYLER LANE
CITY/ST/ZIP/CO: BLOOMFIELD, CT 06002-

OFFICER DIRECTOR

NAME:	MICHAEL FIORILE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	159 PRESTON ROAD		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43209-		
NAME:	JAMES KUNK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7298 ROSEGATE PLACE		
CITY/ST/ZIP/CO:	DUBLIN, OH 43017-		
NAME:	MARSHA PASQUINELLI RYAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	23 PICKETT PLACE		
CITY/ST/ZIP/CO:	NEW ALBANY, OH 43054-		
NAME:	KENAN SCHULTHEIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3425 OAK HILL ROAD		
CITY/ST/ZIP/CO:	EVANSVILLE, IN 47711-		
NAME:	EDWIN SIMCOX	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	10001 N. CUMBERLAND ROAD		
CITY/ST/ZIP/CO:	FISHERS, IN 46037-		
NAME:	DWIGHT ERIC SMITH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2881 SWISHER CREEK COURT		
CITY/ST/ZIP/CO:	NEW ALBANY, OH 43054-		
NAME:	ROGER SUGARMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6025 CRANBERRY COURT		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43213-		
NAME:	DOUGLAS ALLEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD STREET		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JOEL EDWARD BROWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD STREET		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JESSICA BUSS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	700 W. 47TH ST., STE. 350		
CITY/ST/ZIP/CO:	KANSAS CITY, MO 64112-		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOYCE DALLESSIO VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID DALTON VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES DUEMEY VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NANCY EDWARDS VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN ENGLISH VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN HAZELBAKER VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICKY HOLBEIN VICE PRESIDENT 100 STATE AUTO BLVD. NASHVILLE, TN 37072-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID HOSLER VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN HUNCKLER VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEITH ILER VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CATHY BERNATH MILEY VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MATTHEW MROZEK VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL NORDMAN VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN PETRUCCI VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CYNTHIA POWELL VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY JEAN REYNOLDS VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIMOTHY REIK VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LYLE RHODEBECK VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LORRAINE SIEGWORTH VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY WILLEFORD VICE PRESIDENT 518 E. BROAD STREET COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: JAMES YANO TITLE: VICE PRESIDENT ADDRESS: 518 E. BROAD STREET CITY/ST/ZIP/CO: COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: SUSAN BOWRON-WHITE TITLE: ASST SECRETARY ADDRESS: 2955 N. MERIDIAN STREET CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46208-	<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/ SUSAN BOWRON-WHITE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SUSAN BOWRON-WHITE, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	10/25/2011 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.