

<p>1.) CORPORATION NAME: PEERLESS INSURANCE COMPANY</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street</p> <p>RICHMOND, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: NH</p>	<p>DUE DATE: 5/31/2015</p> <p>SCC ID NO: F0064966</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMMON</td> <td>5,000,000</td> </tr> <tr> <td>PREFER</td> <td>113,043</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMMON	5,000,000	PREFER	113,043
CLASS	AUTHORIZED						
COMMON	5,000,000						
PREFER	113,043						

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 62 MAPLE AVE

CITY/ST/ZIP: KEENE, NH 03431

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.

<p>NAME: J. PAUL CONDRIAN III</p> <p>TITLE: P/CEO</p> <p>ADDRESS: 175 BERKELEY ST</p> <p>CITY/ST/ZIP/CO: BOSTON, MA 02117</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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<p>NAME: KRISTIN L KELLEY</p> <p>TITLE: ASST S</p> <p>ADDRESS: 175 BERKELEY ST</p> <p>CITY/ST/ZIP/CO: BOSTON, MA 02116</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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<p>NAME: MICHAEL J FALLON</p> <p>TITLE: CFO</p> <p>ADDRESS: 175 BERKELEY ST</p> <p>CITY/ST/ZIP/CO: BOSTON, MA 02116</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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<p>NAME: LAURANCE H.S. YAHIA</p> <p>TITLE: TRES</p> <p>ADDRESS: 175 BERKELEY STREET</p> <p>CITY/ST/ZIP/CO: BOSTON, MA 02116</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" 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/ KRISTIN L KELLEY	KRISTIN L KELLEY, ASST S	5/14/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

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.