SCC eFile

2012 ANNUAL REPORT

212516361

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

1.) CORPORATION NAME:

COMMERCIAL TRAVELERS MUTUAL INSURANCE COMPANY

DUE DATE: **6/30/2012**

SCC ID NO: **F0097107**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:
CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 70 GENESEE ST

CITY/ST/ZIP: UTICA, NY 13502

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.

[X] OFFICER [X] DIRECTOR

NAME: PAUL H TREVVETT
TITLE: VICE PRESIDENT
ADDRESS: 392 PARDEEVILLE RD
CITY/ST/ZIP/CO: COLD BROOK, NY 13324

[X] OFFICER [X] DIRECTOR

NAME: Mark L. Solverud
TITLE: PRESIDENT
ADDRESS: 4539 Deering Trail
CITY/ST/ZIP/CO: Middleton, WI 53562

[X] OFFICER [ ] DIRECTOR

NAME: DAVID R MILNER
TITLE: VICE PRESIDENT
ADDRESS: 66 WHITFORD AVENUE
CITY/ST/ZIP/CO: WHITESBORO, NY 13492

[X] OFFICER [X] DIRECTOR

NAME: Mathew J. Dew
TITLE: SECRETARY
ADDRESS: 7321 Southern Oak Place
CITY/ST/ZIP/CO: Madison, WI 53593

[X] OFFICER [X] DIRECTOR

NAME: John D Larson
TITLE: CHAIRMAN
ADDRESS: 401 New Castle Way
CITY/ST/ZIP/CO: Madison, WI 53704

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/ DAVID R MILNER	DAVID R MILNER, VICE PRESIDENT	5/1/2012
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.