

SCC eFile

**2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

213549458

1.) CORPORATION NAME:

**PACIFIC INDEMNITY COMPANY**

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F0138844**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,400

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**WI**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: TWO PLAZA EAST STE 1450T  
330 EAST KILBOURN AVE

CITY/ST/ZIP: MILWAUKEE, WI 53202

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:	PAUL J. KRUMP	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	15 MOUNTAIN VIEW ROAD		
CITY/ST/ZIP/CO:	WARREN, NJ 07059		
NAME:	W BRIAN BARNES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/ACTUARY		
ADDRESS:	15 MOUNTIAN VIEW ROAD		
CITY/ST/ZIP/CO:	WARREN, NJ 07059		
NAME:	DOUGLAS A NORDSTROM	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP/TREAS		
ADDRESS:	15 MOUNTAIN VIEW ROAD		
CITY/ST/ZIP/CO:	WARREN, NJ 07059		
NAME:	DINO E. ROBUSTO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	15 MOUNTAIN VIEW ROAD		
CITY/ST/ZIP/CO:	WARREN, NJ 07059		
NAME:	RICHARD G. SPIRO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SVP/CFO		
ADDRESS:	15 MOUNTAIN VIEW ROAD		
CITY/ST/ZIP/CO:	WARREN, NJ 07059		
NAME:	PATRICIA TOMCZYK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	15 MOUNTAIN VIEW ROAD		
CITY/ST/ZIP/CO:	WARREN, NJ 07059		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES A. DARLING DIRECTOR 555 S. FLOWER STREET LOS ANGELES, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN J. KENNEDY DIRECTOR 15 MOUNTAIN VIEW ROAD WARREN, NJ 07059	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HAROLD L. MORRISON, JR. DIRECTOR 15 MOUNTAIN VIEW ROAD WARREN, NJ 07059	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY A. UPDYKE DIRECTOR 555 LONG WHARF DRIVE NEW HAVEN, CT 06511	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Maureen A. Brundage SECRETARY 15 Mountain View Road Warren, NJ 07059	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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/ PATRICIA TOMCZYK SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PATRICIA TOMCZYK, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	10/24/2013 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.			