

1.) CORPORATION NAME:

ULLICO Casualty Company

DUE DATE: **12/31/2011**

SCC ID NO: **F0398257**

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1625 EYE STREET, NW

CITY/ST/ZIP: WASHINGTON, DC 20006-

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: DANIEL ARONOWITZ
TITLE: PRESIDENT
ADDRESS: 1625 EYE STREET, NW
CITY/ST/ZIP/CO: WASHINGTON, DC 20006-

OFFICER

DIRECTOR

NAME: PATRICK MCGLONE
TITLE: GC/SEC/SVP
ADDRESS: 1625 EYE STREET, NW
CITY/ST/ZIP/CO: WASHINGTON, DC 20006-

OFFICER

DIRECTOR

NAME: DAMON GASQUE
TITLE: TREASURER
ADDRESS: 1625 EYE STREET, NW
CITY/ST/ZIP/CO: WASHINGTON, DC 20006-

OFFICER

DIRECTOR

NAME: DAVID A CHRISTHILF
TITLE: DIRECTOR
ADDRESS: 1625 EYE STREET, NW
CITY/ST/ZIP/CO: WASHINGTON, DC 20006-

OFFICER

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/ PATRICK MCGLONE

PATRICK MCGLONE, GC/SEC/SVP

12/6/2011

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.