

1.) CORPORATION NAME:

VICTORIA FIRE & CASUALTY COMPANY

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F0602294**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5915 Landerbrook Drive

CITY/ST/ZIP: Mayfield Heights, OH 44124

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: David G. Arango TITLE: PRESIDENT ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Robert W. Horner III TITLE: SECRETARY ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Wendell P. Crosser TITLE: TREASURER ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Pamela A. Biesecker TITLE: SVP ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: W. Kim Austen TITLE: DIRECTOR ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Martha L. Frye TITLE: DIRECTOR ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Michael P. Leach TITLE: DIRECTOR ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Michael A. Lex TITLE: DIRECTOR ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Mark A. Pizzi TITLE: DIRECTOR ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Kathy R. Richards TITLE: AVP/ Asst. Sec ADDRESS: One Nationwide Plaza CITY/ST/ZIP/CO: Columbus, OH 43215	<input checked="" type="checkbox"/> OFFICER	<input 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/ Kathy R.Richards	Kathy R.Richards, <small>PRINTED NAME AND CORPORATE TITLE</small>	12/26/2012 <small>DATE</small>
<small>SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT</small>	<small>PRINTED NAME AND CORPORATE TITLE</small>	<small>DATE</small>
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.		