

1.) CORPORATION NAME:

DUE DATE: **11/30/2011**

Progressive Northwestern Insurance Company

SCC ID NO: **F1058637**

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	40,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6300 WILSON MILLS ROAD

CITY/ST/ZIP: MAYFIELD VILLAGE, OH 44143-

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: MARK NIEHAUS
TITLE: PRESIDENT
ADDRESS: 6300 WILSON MILLS ROAD
CITY/ST/ZIP/CO: MAYFIELD VILLAGE, OH 44143-

OFFICER

DIRECTOR

NAME: PETER J ALBERT
TITLE: VP/SEC
ADDRESS: 6300 WILSON MILLS ROAD
CITY/ST/ZIP/CO: MAYFIELD VILLAGE, OH 44143-

OFFICER

DIRECTOR

NAME: KATHLEEN M CERNY
TITLE: ASST SECRETARY
ADDRESS: 6300 WILSON MILLS ROAD
CITY/ST/ZIP/CO: MAYFIELD VILLAGE, OH 44143-

OFFICER

DIRECTOR

NAME: THOMAS A KING
TITLE: TREASURER
ADDRESS: 6300 WILSON MILLS ROAD
CITY/ST/ZIP/CO: MAYFIELD VILLAGE, OH 44143-

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/ KATHLEEN M CERNY
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

KATHLEEN M CERNY, ASST
SECRETARY
PRINTED NAME AND CORPORATE
TITLE

10/19/2011

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.