

1.) CORPORATION NAME: <b>ROCKWOOD CASUALTY INSURANCE COMPANY</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>C T CORPORATION SYSTEM          4701 COX ROAD, SUITE 285          GLEN ALLEN, VA</b>	DUE DATE: <b>3/31/2015</b>  SCC ID NO: <b>F1067372</b>  5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>2,000,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	2,000,000
CLASS	AUTHORIZED				
COMMON	2,000,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>					
4.) STATE OR COUNTRY OF INCORPORATION: <b>PA</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 654 MAIN ST

CITY/ST/ZIP: ROCKWOOD, PA 15557

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN PAUL YEDINY TITLE: P/CEO ADDRESS: 654 MAIN ST CITY/ST/ZIP/CO: ROCKWOOD, PA 15557		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID WARREN HAY TITLE: VP/CFO ADDRESS: 654 MAIN ST CITY/ST/ZIP/CO: ROCKWOOD, PA 15557		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KURT DAVID TIPTON TITLE: SR VP ADDRESS: 654 MAIN STREET CITY/ST/ZIP/CO: ROCKWOOD, PA 15557		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CRAIG STEPHEN COMEAUX TITLE: OFFICER ADDRESS: 10101 REUNION PLACE CITY/ST/ZIP/CO: SAN ANTONIO, TX 78216		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: PHILIP SAYRE KIFT TITLE: SECRETARY ADDRESS: 654 MAIN ST CITY/ST/ZIP/CO: ROCKWOOD, PA 15557		

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 WARREN HAY	DAVID WARREN HAY, VP/CFO	3/17/2015
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.