

1.) CORPORATION NAME:

DUE DATE: **4/30/2012**

Allegheny Casualty Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1376591**

**PARACORP INCORPORATED
12610 LAKE NORMANDY LANE
FAIRFAX, VA 22030-7251**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	30,000
COMBV	2,500,000
OTH	47,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: One Newark Center, 20th Floor
Attn. Jose Marquez

CITY/ST/ZIP: Newark, NJ 07102

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: NORMAN R KONVITZ TITLE: PRESIDENT ADDRESS: ONE NEWARK CENTER 20TH FLOOR NEWARK, NJ 07102 CITY/ST/ZIP/CO:</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: ROBERT WILLIAM MINSTER TITLE: PRES/DIR ADDRESS: ONE NEWARK CENTER 20TH FLOOR NEWARK, NJ 07102 CITY/ST/ZIP/CO:</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: VINCENT MARK RICCORDELLA TITLE: PRESIDENT ADDRESS: ONE NEWARK CENTER 20TH FLOOR NEWARK, NJ 07102 CITY/ST/ZIP/CO:</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: FRANCIS L MITTERHOFF TITLE: VP/DIR ADDRESS: ONE NEWARK CENTER 20TH FLOOR NEWARK, NJ 07102 CITY/ST/ZIP/CO:</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MARIA DULCE COSTA TITLE: TREASURER ADDRESS: ONE NEWARK CENTER 20TH FLOOR NEWARK, NJ 07102 CITY/ST/ZIP/CO:</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	BRIAN N NAIRIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ONE NEWARK CENTER		
CITY/ST/ZIP/CO:	20TH FLOOR NEWARK, NJ 07102		

NAME:	JERRY W WATSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ONE NEWARK CENTER		
CITY/ST/ZIP/CO:	20TH FLOOR NEWARK, NJ 07102		

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/ FRANCIS L MITTERHOFF	FRANCIS L MITTERHOFF, VP/DIR	4/3/2012
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.