

1.) CORPORATION NAME:

OHIO SECURITY INSURANCE COMPANY

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

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

OH

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

SCC ID NO: **F1403130**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	49,999

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9450 SEWARD RD

CITY/ST/ZIP: FAIRFIELD, OH 45014-

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.

OFFICER

DIRECTOR

NAME: JOHN D DOYLE
TITLE: D/AT
ADDRESS: 175 BERKELEY ST
CITY/ST/ZIP/CO: BOSTON, MA 02117-

OFFICER

DIRECTOR

NAME: KRISTIN K CIOTTI
TITLE: ASST SECRETARY
ADDRESS: 175 BERKELEY ST
CITY/ST/ZIP/CO: BOSTON, MA 02116-

OFFICER

DIRECTOR

NAME: DEXTER R LEGG
TITLE: SECRETARY
ADDRESS: 175 BERKELEY ST
CITY/ST/ZIP/CO: BOSTON, MA 02116-

OFFICER

DIRECTOR

NAME: J. PAUL CONDRIN III
TITLE: P/CEO
ADDRESS: 175 BERKELEY STREET
CITY/ST/ZIP/CO: BOSTON, MA 02116-

OFFICER

DIRECTOR

NAME: MICHAEL J FALLON
TITLE: D
ADDRESS: 175 BERKELEY ST
CITY/ST/ZIP/CO: BOSTON, MA 02117-

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.

<u>/s/ KRISTIN K CIOTTI</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>KRISTIN K CIOTTI, ASST SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>12/15/2011</u> DATE
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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.