

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	213551951
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1.) CORPORATION NAME: <b>Old Guard Insurance Company</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX RD STE 301          GLEN ALLEN, VA 23060-6802</b>	DUE DATE: <b>1/31/2013</b>  SCC ID NO: <b>F1496795</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>100,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100,000
CLASS	AUTHORIZED				
COMMON	100,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b>					
4.) STATE OR COUNTRY OF INCORPORATION: <b>OH</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE PARK CIRCLE

CITY/ST/ZIP: WESTFIELD CENTER, OH 44251-5001

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 type="checkbox"/> DIRECTOR
NAME: Edward J Largent TITLE: PRESIDENT ADDRESS: ONE PARK CIRCLE CITY/ST/ZIP/CO: WESTFIELD CENTER, OH 44251		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: FRANK CARRINO TITLE: CORP COUN/SEC ADDRESS: One Park Circle CITY/ST/ZIP/CO: Westfield Center, OH 44251		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JOSEPH C KOHMANN TITLE: CFO/T ADDRESS: ONE PARK CIRCLE P O BOX 5001 CITY/ST/ZIP/CO: WESTFIELD CENTER, OH 44251-5001		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: James R Clay TITLE: CEO ADDRESS: ONE PARK CIRCLE P O BOX 5001 CITY/ST/ZIP/CO: WESTFIELD CENTER, OH 44251-5001		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: BAMBI A BESHIRE TITLE: CONTROLLER ADDRESS: One Park Circle CITY/ST/ZIP/CO: Westfield Center, OH 44251		

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/ FRANK CARRINO	FRANK CARRINO, CORP COUN/SEC	12/14/2012
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.