

1.) CORPORATION NAME:

**Acadia Insurance Company**

DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**KEVIN W NATTRASS  
BERKLEY MID-ATLANTIC GROUP  
4820 LAKE BROOK DR STE 300**

SCC ID NO: **F1527383**

**GLEN ALLEN, VA 23060**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NH**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE ACADIA COMMONS PO BOX 9010

CITY/ST/ZIP: WESTBROOK, ME 04098

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:	WILLIAM M. ROHDE, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	475 STEAMBOAT ROAD		
CITY/ST/ZIP/CO:	GREENWICH, CT 06830		

NAME:	DANIEL L SWIFT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1 ACADIA COMMONS		
CITY/ST/ZIP/CO:	WESTBROOK, ME 04092		

NAME:	CHARLES A HAMBLEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	T/CFO/SVP		
ADDRESS:	1 ACADIA COMMONS		
CITY/ST/ZIP/CO:	WESTBROOK, ME 04092		

NAME:	EUGENE G BALLARD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	475 STEAMBOAT ROAD		
CITY/ST/ZIP/CO:	GREENWICH, CT 06830		

NAME:	WILLIAM R BERKLEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	475 STEAMBOAT ROAD		
CITY/ST/ZIP/CO:	GREENWICH, CT 06830		

NAME:	WILLIAM R BERKLEY, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	475 STEAMBOAT ROAD		
CITY/ST/ZIP/CO:	GREENWICH, CT 06830		

NAME: IRA S LEDERMAN TITLE: DIRECTOR ADDRESS: 475 STEAMBOAT ROAD CITY/ST/ZIP/CO: GREENWICH, CT 06830	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CLEMENT P PATAFIO TITLE: DIRECTOR ADDRESS: 475 STEAMBOAT ROAD CITY/ST/ZIP/CO: GREENWICH, CT 06830	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DOUGLAS MICHAEL NELSON TITLE: PRESIDENT ADDRESS: 1 ACADIA COMMONS CITY/ST/ZIP/CO: WESTBROOK, ME 04092	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> 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/ CHARLES A HAMBLEN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CHARLES A HAMBLEN, T/CFO/SVP PRINTED NAME AND CORPORATE TITLE	8/20/2012 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.		