

SCC eFile

**2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

213539787

1.) CORPORATION NAME:

United States Surety Company

DUE DATE: **10/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1603069**

GLEN ALLEN, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	7,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

MD

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 20 W AYLESBURY ROAD

CITY/ST/ZIP: TIMONIUM, MD 21093

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: RICHARD E KLEIN
 TITLE: CHAIRMAN
 ADDRESS: 20 WEST AYLESBURY RD
 CITY/ST/ZIP/CO: TIMONIUM, MD 21093

OFFICER

DIRECTOR

NAME: CHRISTOPHER J.B. WILLIAMS
 TITLE: EXEC. VP
 ADDRESS: 13403 NORTHWEST FREEWAY
 CITY/ST/ZIP/CO: HOUSTON, TX 77040

OFFICER

DIRECTOR

NAME: DANIEL AGUILAR
 TITLE: VICE PRESIDENT
 ADDRESS: 601 SO. FIGUEROA ST.
 CITY/ST/ZIP/CO: LOS ANGELES, CA 90017

OFFICER

DIRECTOR

NAME: SURAYA K. BERNARD
 TITLE: VICE PRESIDENT
 ADDRESS: 600 LEXINGTON AVE., 22ND FL.
 CITY/ST/ZIP/CO: NEW YORK, NY 10022

OFFICER

DIRECTOR

NAME: SHARON BROCK
 TITLE: VICE PRESIDENT
 ADDRESS: 13403 NORTHWEST FREEWAY
 CITY/ST/ZIP/CO: HOUSTON, TX 77040

OFFICER

DIRECTOR

NAME: JEFFREY D. GERBERICH
 TITLE: VICE PRESIDENT
 ADDRESS: 20 W. AYLESBURY ROAD
 CITY/ST/ZIP/CO: TIMONIUM, MD 21093

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEOFFREY GEORGE LAKIS VICE PRESIDENT 20 W. AYLESBURY ROAD TIMONIUM, MD 21093	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANK M. LANAK VICE PRESIDENT 601 SO. FIGUEROA ST. LOS ANGELES, CA 90017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANK M. MESTER VICE PRESIDENT 601 SO. FIGUEROA ST. LOS ANGELES, CA 90017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOYCELYN M. RAY VP & AS 13403 NORTHWEST FREEWAY HOUSTON, TX 77040	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM H. SOHN VICE PRESIDENT 20 W. AYLESBURY ROAD TIMONIUM, MD 21093	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROL T. NEVIN PRESIDENT 20 W. AYLESBURY ROAD TIMONIUM, MD 21093	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PETER CARMAN SVP & CFO 20 W. AYLESBURY RT. TIMONIUM, MD 21094-5605	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RANDY D. RINICELLA ASST SECRETARY 13403 NORTHWEST FREEWAY HOUSTON, TX 77040	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ADAM S. PESSIN SVP 601 SO. FIGUEROA ST. LOS ANGELES, CA 90017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK W CALLAHAN DIRECTOR 13403 NORTHWEST FREEWAY HOUSTON, TX 77040	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL J. DONOVAN DIRECTOR 13403 NORTHWEST FREEWAY HOUSTON, TX 77040	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRAD T IRICK DIRECTOR 13403 NORTHWEST FREEWAY HOUSTON, TX 77040	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	--	----------------------------------	--

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAMELA J. PENNY DIRECTOR 13403 NORTHWEST FREEWAY HOUSTON, TX 77040	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	---	----------------------------------	--

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL J. SCHELL DIRECTOR 13403 NORTHWEST FREEWAY HOUSTON, TX 77040	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
--	---	----------------------------------	--

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Alexander Ludlow SECRETARY 13403 Northwest Freeway Houston, TX 77040	<input checked="" type="checkbox"/> OFFICER	<input 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/ Alexander Ludlow	Alexander Ludlow, SECRETARY	8/26/2013
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.