

SCC eFile
(6/10)

2010 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

210505298

1.) CORPORATION NAME:

Max Specialty Insurance Services Ltd.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.
AUTH IN VI
CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060**

DUE DATE: **11/30/2010**

SCC ID NO: **F1728866**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9020 STONY POINT PARKWAY
STE 325

CITY/ST/ZIP: RICHMOND, VA 23235-

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: STEPHEN M LODERICK OFFICER DIRECTOR
TITLE: TREASURER
ADDRESS: 9020 STONY POINT PKWY
SUITE 325
CITY/ST/ZIP/CO: RICHMOND, VA 23235-

NAME: STEPHEN J VACCARO JR OFFICER DIRECTOR
TITLE: PRESIDENT
ADDRESS: 9020 STONY POINT PKWY
STE 325 C/O MAX SPECIALTY INSURANCE COMPANY
CITY/ST/ZIP/CO: RICHMOND, VA 23235-

NAME: PETER A MINTON OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 2 FRONT ST C/O MAX RE CAPITAL LTD
CITY/ST/ZIP/CO: HAMLIN, -, BERMUDA

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/ STEPHEN M LODERICK STEPHEN M LODERICK, 11/24/2010
SIGNATURE OF DIRECTOR/OFFICER TREASURER DATE
LISTED IN THIS REPORT PRINTED NAME AND CORPORATE
TITLE

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.