No. C 190373		Du	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. NUTMEG INSURANCE COMPANY ONE HARTFORD CT 06155 C T CORPORATION SYSTER SOISE ID 83705 USA C T CORPORATION SYSTER SOISE ID 83705 USA 3. New Registered Agent Si		G			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		oss Addresses of	Procident Secretary and Directors Trans	urar (antional)			
Office Held Name		ess Addi esses of	Street or PO Address	City	State	Country	Postal Code
PRESIDENT SECRETARY	ESIDENT ANDRE A NAPOLI		ONE HARTFORD PLAZA ONE HARTFORD PLAZA	HARTFORD HARTFORD	CT CT	USA USA	06155 06155
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
СТ С 190373		Signature: Te Name (type o		Date: 03/03/2014 Title: Secretary			
Processed 03/03/2014 * Electronically provided signatures are accepted as original signatures.							