



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 146899		2. Exact name of the Corporation Markel Aspen, Inc.			
3. Principal office address 222 S 15TH STREET, #1500N		City Omaha		State NE	Zip 68102
4. Business Phone No. 888-500-3344		5. State of Incorporation Delaware			
6. Brief description of the character of business conducted in Rhode Island Insurance holding company					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			100	Common	\$0.01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Form No. 630
Revised: 01/2012

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

FILED

MAR 16 2016

By **20183**

A.A. 1033 A.M.

Signature of Authorized Representative

Karl M. Strait

Print or Type Name of Authorized Representative

3/14/16

Date

Markel Aspen, Inc.

RI ID#146899

Filing Period January 1 – March 1, 2015

Directors

Gerard Albanese, Jr.*

F. Michael Crowley*

Britton L. Glisson*

Anne G. Waleski*

Richard R. Whitt, III*

Officers

F. Michael Crowley*

Anne G. Waleski*

Richard R. Grinnan*

Genevieve K. Murtaugh*

Kelli S. Plusch *

Karl M. Strait*

Stephen P. Letak**

April L. Duff*

Chairman of the Board and President

Vice President and Treasurer

Vice President and Secretary

Assistant Secretary/Senior Tax Director

Assistant Secretary/Tax Director

Assistant Secretary

Assistant Treasurer

Assistant Treasurer

* 4521 Highwoods Parkway, Glen Allen, VA 23060

** 2 Front Street, Hamilton HM11 Bermuda