AMERICAN INTERNATIONAL COMPANIES

PROGRAM DIVISION BULLETIN

2003-18 June 25, 2003

Lexington Insurance Company is moving! Important Information Regarding Our Change in Address

LEXINGTON INSURANCE AND LANDMARK INSURANCE ONLY (ALL POLICIES ISSUED ON OTHER COMPANY PAPER IS NOT EFFECTED)

Effective August 1, 2003, Lexington Insurance will be moving a few short blocks to our new home at 100 Summer Street in Boston. This move will reunite several operations which have been located in separate locations previously. As required by regulation, all policyholders must be notified of this change in address.

Attached with this bulletin are several documents which will be necessary for any polices issued by *Lexington Insurance Company* or *Landmark Insurance Company*:

- Change of Address Endorsement this form must be attached to all policies issued by either company displaying an effective date of August 1, 2003;
- Letter to Insureds informing the policyholder of the company's move and the new address which should accompany each endorsement;
- Letter to Brokers informing brokers of the company's move and the new address for correspondence:
- Administrators using production systems other than CoverAll should make certain to revise any declarations pages and Service of Suit forms to reflect the new company address; if you would like the company to provide you copies of any forms, please contact your Program Manager;

All in-force policies with Lexington Insurance Co. or Landmark Insurance Co. should be endorsed with the required endorsement. After August 1, 2003, all new business should be issued reflecting the new company address. We request that notices be distributed by July 18, 2003 in order to provide advance notice to customers.

Rather than retain a copy of each notice and endorsement to return to the company, we are requesting that you maintain a list of mailing with the US Post Office as means of documenting your compliance with this request.

If you have any questions regarding this notice, please contact your Program Manager.

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LEXINGTON INSURANCE COMPANY PROGRAM DIVISION

This endorsement, effective 12:01 a.m. on AUGUST 1, 2003

Forms a part of policy no .: < POLICY NO>

Issued to: <INS NAME>

By: <ISSUING COMPANY>

CHANGE OF ADDRESS ENDORSEMENT

In the policy wherever the Company's, Insurer's, or our address is stated as 200 State Street, Boston, MA 02109, the Company's, Insurer's, or our address is deleted and replaced with the following new address:

100 Summer Street Boston, MA 02110-2103

Follow the instructions in the policy for mailing all correspondence, including but not limited to, any notices of claims or suits to the new address stated above.

All other terms and conditions of the policy remain unchanged.

	Authorized	R	epr	ese	ent	tat	ive	3
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<ISSUING COMPANY>

200 State Street Boston, Massachusetts 02109

<producer no=""></producer>	
<date></date>	
<ins name=""> <ins 1="" address="" line=""> <ins 2="" address="" line=""> <ins city="">, <ins state=""> <ins code<="" td="" zip=""><td>E></td></ins></ins></ins></ins></ins></ins>	E>

Re: <POLICY NO>

Effective August 1, 2003, the offices of <ISSUING COMPANY> will be relocating to:

100 Summer Street Boston, MA 02110-2103

As of this date, all correspondence with <ISSUING COMPANY> should be sent to the address listed on the enclosed policy endorsement. That endorsement forms part of your policy and should be filed with your policy documents for future reference.

Should you have questions concerning this endorsement, please contact your broker or agent.

Sincerely,

<ISSUING COMPANY>

cc: <PRODUCER NAME>

<ISSUING COMPANY> 200 State Street Boston, Massachusetts 02109

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<DATE>
<PROD NAME>
<PROD ADDRESS 1>
<PROD ADDRESS 2>
<PROD CITY>, <PROD STATE> <PROD ZIP CODE>
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Re: <INS NAME> <POLICY NO>

Effective August 1, 2003, the offices of <ISSUING COMPANY> will be relocating to:

100 Summer Street Boston, MA 02110-2103

A Change of Address Endorsement has been mailed to the Named Insured shown above. A copy of this Endorsement has been enclosed for your records.

Sincerely,

<ISSUING COMPANY>