

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **352787** (6)
1. Corporation Name
DEERFIELD 21 CORPORATION



Principal Place of Business CHASE ENTERPRISES - ONE COMMERCIAL PLAZA ATTN JOSEPH KORZENIK HARTFORD CT 06103-0599	Mailing Address CHASE ENTERPRISES - ONE COMMERCIAL PLAZA ATTN JOSEPH KORZENIK HARTFORD CT 06103
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3. Date Incorporated or Qualified 09/24/1969 ✓	3a. Date of Last Report 04/01/1996
4. FEI Number 59-1311294 ✓	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent ST. LOUIS, ROLAND R., JR. FRIEDMAN, RODRIGUEZ & FERRARO, P.A 201 BISCAYNE BLVD., 2300 MIAMI CENTER MIAMI FL 33131		10. Name and Address of New Registered Agent	
B1	Name	B4	City
B2	Street Address (P.O. Box Number is Not Acceptable)	B5	Zip Code
B3			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VSD FREEDMAN, CHERYL CHASE ONE COMMERCIAL PLAZA HARTFORD CT	<input checked="" type="checkbox"/> DELETE	1.1 TITLE
NAME			VSD CHASE, CHERYL A.
STREET ADDRESS			1.2 NAME
CITY - ST - ZIP			1.3 STREET ADDRESS
TITLE	PD CHASE, DAVID, T ONE COMMERCIAL PLAZA HARTFORD CT	<input type="checkbox"/> DELETE	1.4 CITY - ST - ZIP
NAME			2.1 TITLE
STREET ADDRESS			2.2 NAME
CITY - ST - ZIP			2.3 STREET ADDRESS
TITLE	VTD CHASE, ARNOLD L. ONE COMMERCIAL PLAZA HARTFORD CT	<input type="checkbox"/> DELETE	2.4 CITY - ST - ZIP
NAME			3.1 TITLE
STREET ADDRESS			3.2 NAME
CITY - ST - ZIP			3.3 STREET ADDRESS
TITLE		<input type="checkbox"/> DELETE	3.4 CITY - ST - ZIP
NAME			4.1 TITLE
STREET ADDRESS			4.2 NAME
CITY - ST - ZIP			4.3 STREET ADDRESS
TITLE		<input type="checkbox"/> DELETE	4.4 CITY - ST - ZIP
NAME			5.1 TITLE
STREET ADDRESS			5.2 NAME
CITY - ST - ZIP			5.3 STREET ADDRESS
TITLE		<input type="checkbox"/> DELETE	5.4 CITY - ST - ZIP
NAME			6.1 TITLE
STREET ADDRESS			6.2 NAME
CITY - ST - ZIP			6.3 STREET ADDRESS
TITLE		<input type="checkbox"/> DELETE	6.4 CITY - ST - ZIP
NAME			
STREET ADDRESS			
CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Cheryl A. Chase* REQUIRED Cheryl A. Chase 3/25/97 (860) 549-1674
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)