

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 24, 2000 8:00 am**  
**Secretary of State**

05-24-2000 90188 046 \*\*\*150.00

**DOCUMENT #** 352787

**1. Entity Name**  
 DEERFIELD 21 CORPORATION

**Principal Place of Business**  
 c/o CHASE ENTERPRISES  
 ATTN: JOSEPH KORZENIK  
 ONE COMMERCIAL PLAZA  
 HARTFORD, CT 06103

**Mailing Address**  
 c/o CHASE ENTERPRISES  
 ATTN: JOSEPH KORZENIK  
 ONE COMMERCIAL PLAZA  
 HARTFORD, CT 06103

**B0097526**

DO NOT WRITE IN THIS SPACE

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

City & State

**4. FEI Number**  
 59-1311294

Applied For
Not Applicable

Zip Country

**5. Certificate of Status Desired**  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.**

**SIGNATURE** \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.**   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing Trust Fund Contribution.**  **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  Delete  
 NAME VSD  
 STREET ADDRESS CHASE, CHERYL A  
 CITY-ST-ZIP ONE COMMERCIAL PLAZA  
 HARTFORD, CT 06103

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME PD  
 STREET ADDRESS CHASE, DAVID T  
 CITY-ST-ZIP ONE COMMERCIAL PLAZA  
 HARTFORD, CT 06103

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME VTD  
 STREET ADDRESS CHASE, ARNOLD L  
 CITY-ST-ZIP ONE COMMERCIAL PLAZA  
 HARTFORD, CT 06103

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
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TITLE  Change  Addition  
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TITLE  Delete  
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 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

**13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**  Cheryl A. Chase, Exec. Vice Pres 4/24/00 860/293-4315  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #