

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90104 043 ***150.00

653258

DO NOT WRITE IN THIS SPACE

DOCUMENT # 803376

1. Entity Name

THE TRAVELERS INSURANCE COMPANY

Principal Place of Business

Mailing Address

TOWER SQUARE
 HARTFORD, CONNECTICUT 06183

ONE TOWER SQUARE
 HARTFORD, CT 06183

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

06-0566090

Applied For

Not Applicable

Zip

Country

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

INSURANCE COMMISSIONER
 CAPITOL BUILDING
 TALLAHASSEE FL 32304

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 NAME STREET ADDRESS CITY-ST-ZIP	DPO DANIELS, J. ERIC 6 ATWATER, DEVONWOOD FARMINGTON, CT 06032	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V/O BENET, JAY S. 3 SPRING LANE WEST HARTFORD, CT 06117	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/C CARPENTER, MICHAEL A 134 OTTER ROCK DRIVE GREENWICH CT	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCPO KOKULIS, GEORGE C. ONE TOWER SQUARE HARTFORD, CT 06183	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V/O LAMMEY, GLENN D. ONE TOWER SQUARE HARTFORD, CT 06183	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/GC LEWITUS, MARLA BERMAN ONE TOWER SQUARE HARTFORD, CT 06183	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Ernest J. Wright* Ernest J. Wright, Secretary

4/28/2000

(860) 277-9860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

653258
DH# 803376

ATTACHMENT TO FLORIDA DEPARTMENT OF STATE
CORPORATION ANNUAL REPORT
THE TRAVELERS INSURANCE COMPANY

OFFICERS/DIRECTORS

V

Baritz, Stuart L.
1345 Avenue of the Americas
22nd Floor
New York, NY 10105

V

Fishman, Jay S.
One Tower Square
Hartford, CT 06183

V

Jacobson, Barry
One Tower Square
Hartford, CT 06183

V

Johnson, Russell H.
One Tower Square
Hartford, CT 06183

V

May, Warren H.
One Tower Square
Hartford, CT 06183

V

Preston, Kathleen
One Tower Square
Hartford, CT 06183

V

Thornton, Mary Jean
One Tower Square
Hartford, CT 06183

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H-03370

V

Tyson, David A.
One Tower Square
Hartford, CT 06183

V

Voss, F. Denney
One Tower Square
Hartford, CT 06183

D/V/O

Weill, Marc P.
388 Greenwich Street
New York, NY 10013

T

White, William H.
One Tower Square
Hartford, CT 06183

S

Wright, Ernest J.
One Tower Square
Hartford, CT 06183