

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **805276** (3)
1. Corporation Name
THE CHARTER OAK FIRE INSURANCE COMPANY



Principal Place of Business: **ONE TOWER SQUARE HARTFORD CT 06183 US**
Mailing Address: **ONE TOWER SQUARE HARTFORD CT 06183 US**

3. Date Incorporated or Qualified: **10/26/1940**
3a. Date of Last Report: **03/29/1995**
4. FEI Number: **06-0291290**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

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

9. Name and Address of Current Registered Agent
**STATE INSURANCE COMMISSIONER
CAPITOL BUILDING
TALLAHASSEE FL 32304**

10. Name and Address of New Registered Agent
81 Name []
82 Street Address (P.O. Box Number is Not Acceptable) []
83 []
84 City [] 85 Zip Code [] **FL**

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) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	DV	<input type="checkbox"/> DELETE
NAME	CALVANO, JAMES F	
STREET ADDRESS	54 MOHAWK AVENUE	
CITY-ST-ZIP	NORWOOD NJ	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CARPENTER, MICHAEL A	
STREET ADDRESS	134 OTTER ROCK DRIVE	
CITY-ST-ZIP	GREENWICH CT	
TITLE	P	<input type="checkbox"/> DELETE
NAME	CLARKE, CHARLES J.	
STREET ADDRESS	57 SULKY LN	
CITY-ST-ZIP	GLASTONBURY CT	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PRINCE, CHARLES O	
STREET ADDRESS	100 VALLEY FORGE RD	
CITY-ST-ZIP	WESTON CT	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ETTINGER, IRWIN R	
STREET ADDRESS	180 DOGWOOD LANE	
CITY-ST-ZIP	STAMFORD CT	
TITLE	DO	<input type="checkbox"/> DELETE
NAME	FISHMAN, JAY S	
STREET ADDRESS	82 OWATONNA STR	
CITY-ST-ZIP	HAWORTH NJ	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Calvano, James F
1.3 STREET ADDRESS	54 Mohawk Avenue
1.4 CITY-ST-ZIP	Norwood, NJ
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	D/O/C
6.3 STREET ADDRESS	Fishman, Jay S
6.4 CITY-ST-ZIP	82 Owatonna Street Haworth, NJ

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: _____ DATE: **4/15/1996** (860) 277-3743

CR2E034 (12/95)

ATTACHMENT TO FLORIDA DEPARTMENT OF STATE
CORPORATION ANNUAL REPORT
THE CHARTER OAK FIRE INSURANCE COMPANY

OFFICERS/DIRECTORS

D/C/O

Lipp, Robert I.
38 Park Road
Scarsdale, NY 10583

V

Anderson, James T.
411 Overlook Road
Glastonbury, CT 06033

V

Barbieri, Richard C.
124 Brookview Drive
Vernon, CT 06066

S/V/D/O

DeCarlo, Donald T.
200 Manor Road
Douglaston, NY 11363

V

Foley, Ronald E., Jr.
125 Stoner Drive
West Hartford, CT 06107

S

Foran, Terrence J.
95 Ladyslipper Lane
Glastonbury, CT 06033

V

Green, Robert B.
14 North Drive
Simsbury, CT 06070

V

Hammond, Dale S.
152 Windshire
South Windsor, CT 06074

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CORPORATION ANNUAL REPORT
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OFFICERS/DIRECTORS (CONTINUED)

V

Higgins, Peter N.
114 Squires Glenn
Madison, CT 06443

V

Mannes, Barry L.
29 Stags Leap Court
Pikesville, MD 21208-1029

V

Morrison, Richard F.
10 Whispering Way
Warren, NJ 07059

V

Nothem, James M.
110 School Street
Coventry, CT 06238

V

Palczynski, Richard W.
31 Lee Lane
Tolland, CT 06084

V

Patterson, James A.
15 Highland St., #109
West Hartford, CT 06119

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OFFICERS/DIRECTORS (CONTINUED)

V
Shea, Thompson
97 Holmes Road
Ridgefield, CT 06877

V
Tyson, David A.
53 Country Club Lane
East Granby, CT 06026

V
Voss, F. Denney
1 Grace Church Street
Rye, NY 10580

D/V/O
Weill, Marc P.
170 East 87th Street, Apt. West 11C
New York, NY 10128

T
White, William H.
8 Woodchuck Hill Road
Canton, CT 06019

V
Willett, W. Douglas
180 Langford Lane
East Hartford, CT 06118

V
Wright, Ronald O.
725 Chestnut Hill Road
Glastonbury, CT 06033