

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 805276

1. Entity Name
THE CHARTER OAK FIRE INSURANCE COMPANY

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90066 029 ***150.00

Principal Place of Business
ONE TOWER SQUARE
HARTFORD CONNECTICUT 06183
US

Mailing Address
ONE TOWER SQUARE
HARTFORD CONNECTICUT 06183
US

80061322

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Zip Country

4. FEI Number
06-0291290

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

STATE INSURANCE COMMISSIONER
200 EAST GAINES STREET
LARSON BUILDING
TALLAHASSEE FL 32399-0300

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

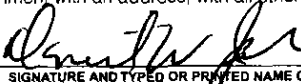
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
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TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D/C
STREET ADDRESS	CLARKE, CHARLES J.
CITY-ST-ZIP	ONE TOWER SQUARE HARTFORD CT 06183
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D/C/P/O
STREET ADDRESS	FISHMAN, JAY S.
CITY-ST-ZIP	ONE TOWER SQUARE HARTFORD CT 06183
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D/V/O
STREET ADDRESS	FOLEY, RONALD E., JR.
CITY-ST-ZIP	ONE TOWER SQUARE HARTFORD CT 06183
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D/V/O
STREET ADDRESS	HANNON, WILLIAM P.
CITY-ST-ZIP	ONE TOWER SQUARE HARTFORD CT 06183
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D/V/O
STREET ADDRESS	KIERNAN, JOSEPH P.
CITY-ST-ZIP	ONE TOWER SQUARE HARTFORD CT 06183
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D/V/O/S
STREET ADDRESS	MICHENER, JAMES M.
CITY-ST-ZIP	ONE TOWER SQUARE HARTFORD CT 06183

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:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel W. Jackson 3/15/00
Asst. Secretary Date

(860) 277-4012
Daytime Phone #

CR2E034 (9/99)

**ATTACHMENT TO 2000 UNIFORM BUSINESS REPORT (UBR)
THE CHARTER OAK FIRE INSURANCE COMPANY**

12. ADDITIONS TO OFFICERS AND DIRECTORS IN 11:

V
 TYSON, DAVID A.
 ONE TOWER SQUARE
 HARTFORD CT 06183

V
 VOSS, F. DENNEY
 388 GREENWICH STREET
 NEW YORK NY 10013

V/T
 WHITE, WILLIAM H.
 ONE TOWER SQUARE
 HARTFORD CT 06183

V
 WILLETT, W. DOUGLAS
 ONE TOWER SQUARE
 HARTFORD CT 06183

V
 YESSMAN, TIMOTHY M.
 ONE TOWER SQUARE
 HARTFORD CT 06183

**ATTACHMENT TO 2000 UNIFORM BUSINESS REPORT (UBR)
THE CHARTER OAK FIRE INSURANCE COMPANY**

12. ADDITIONS TO OFFICERS AND DIRECTORS IN 11:

V/O

GIBBS, J. DAVID
ONE TOWER SQUARE
HARTFORD CT 06183

V

HEALY, PAUL A.
ONE TOWER SQUARE
HARTFORD CT 06183

V

HIGGINS, PETER N.
ONE TOWER SQUARE
HARTFORD CT 06183

AS

JACKSON, DANIEL W.
ONE TOWER SQUARE
HARTFORD CT 06183

O

KHANNA, ANIL (BOB)
ONE TOWER SQUARE
HARTFORD CT 06183

V

LAMMEY, GLENN D.
ONE TOWER SQUARE
HARTFORD CT 06183

V

MEAD, CHRISTINE B.
ONE TOWER SQUARE
HARTFORD CT 06183

V

MORRIS, C. TIMOTHY
ONE TOWER SQUARE
HARTFORD CT 06183

V

SHROAT, JERRY T.
ONE TOWER SQUARE
HARTFORD CT 06183