

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 23, 2001 8:00 am**  
**Secretary of State**

04-23-2001 90027 033 \*\*\*150.00

**DOCUMENT # 808357**

1. Entity Name

**THE TRAVELERS INDEMINITY COMPANY OF AMERICA**

Principal Place of Business

**ONE TOWER SQUARE  
HARTFORD CT 06183  
US**

Mailing Address

**ONE TOWER SQUARE  
HARTFORD CT 06183  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **58-6020487**

Applied For

Not Applicable

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

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

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, 2001 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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DC<br>CLARKE, CHARLES J.<br>ONE TOWER SQUARE<br>HARTFORD CT 06183   | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>CLARKE, CHARLES J.<br>ONE TOWER SQUARE<br>HARTFORD, CT 06183 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DVO<br>FOLEY, RONALD E JR<br>ONE TOWER SQUARE<br>HARTFORD CT 06183  | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DVO<br>KIERNAN, JOSEPH P.<br>ONE TOWER SQUARE<br>HARTFORD CT 06183  | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DO<br>KIERNAN, JOSEPH P.<br>ONE TOWER SQUARE<br>HARTFORD, CT 06183 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DVO<br>HANNON, WILLIAM P.<br>ONE TOWER SQUARE<br>HARTFORD CT 06183  | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DVOS<br>MICHENER, JAMES M.<br>ONE TOWER SQUARE<br>HARTFORD CT 06183 | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DCPO<br>FISHMAN, JAY S<br>ONE TOWER SQUARE<br>HARTFORD CT 06183     | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DC<br>FISHMAN, JAY S.<br>ONE TOWER SQUARE<br>HARTFORD, CT 06183    | <input checked="" 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Daniel W. Jackson**  
**Asst. Secretary**4/9/01  
Date860 277-4012  
Daytime Phone #

CR2E034 (10/00)

Attachment Doc # 808357 AW83417

**ATTACHMENT TO 2001 UNIFORM BUSINESS REPORT (UBR)  
THE TRAVELERS INDEMNITY COMPANY OF AMERICA  
DOCUMENT #808357**

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

D/O

ELLIOT, DOUGLAS G.  
ONE TOWER SQUARE  
HARTFORD, CT 06183

D/V/O

MEAD, CHRISTINE B.  
ONE TOWER SQUARE  
HARTFORD, CT 06183

D/V

SHROAT, JERRY T.  
ONE TOWER SQUARE  
HARTFORD, CT 06183

V

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

V

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

V

VOSS, F. DENNEY  
399 PARK AVENUE  
NEW YORK, NY 10022

Attachment Doc # 808357 <sup>Assn</sup>

V

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

V

YESSMAN, TIMOTHY M  
ONE TOWER SQUARE  
HARTFORD, CT 06183

V/T

WHITE, WILLIAM H.  
ONE TOWER SQUARE  
HARTFORD, CT 06183

AS

JACKSON, DANIEL W.  
ONE TOWER SQUARE  
HARTFORD, CT 06183