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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **836301 (2)**
1. Corporation Name
THE TRAVELERS INDEMNITY COMPANY OF ILLINOIS



Principal Place of Business: **184 SHUMAN BLVD. NAPERVILLE FL 60563 US**
Mailing Address: **ONE TOWER SQUARE HARTFORD CT 06183 US**

3. Date Incorporated or Qualified: **05/06/1976** 3a. Date of Last Report: **03/29/1995**
4. FEI Number: **36-2719165** Applied For: Not Applicable
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** 2a. Mailing Address: **26**
Suite, Apt. #, etc.: Suite, Apt. #, etc.:
City & State: **23 Naperville, IL** City & State: **28**
Zip: **24** Country: **25** Zip: **29** Country: **30**

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: **FL** 85 Zip Code:

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CALVANO, JAMES F	1.2 NAME	Calvano, James F
STREET ADDRESS	54 MOHAWK AVENUE	1.3 STREET ADDRESS	54 Mohawk Avenue
CITY-ST-ZIP	NORWOOD NJ	1.4 CITY-ST-ZIP	Norwood, NJ
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRINCE, CHARLES O	2.2 NAME	
STREET ADDRESS	100 VALLEY FORGE RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WESTON CT	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARPENTER, MICHAEL A	3.2 NAME	
STREET ADDRESS	134 OTTER ROCK DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	GREENWICH CT	3.4 CITY-ST-ZIP	
TITLE	DO <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FISHMAN, JAY S	4.2 NAME	Fishman, Jay S
STREET ADDRESS	82 OWATONNA STR	4.3 STREET ADDRESS	82 Owatonna Street
CITY-ST-ZIP	HAWORTH NJ	4.4 CITY-ST-ZIP	Haworth, NJ
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COSTELLO, JOHN	5.2 NAME	
STREET ADDRESS	2809 MANOR DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBROOK IL	5.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARKE, CHARLES J.	6.2 NAME	
STREET ADDRESS	57 SULKY LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	GLASTONBURY CT	6.4 CITY-ST-ZIP	

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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: _____ 4/15/1996 (860) 277-3743
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

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

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

D

Ettinger, Irwin R.
180 Dogwood Lane
Stamford, CT 06903

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

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

OFFICERS/DIRECTORS (CONTINUED)

V

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

V

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

D

Kyrillis, Paul B.
1018 Bristol Court
Wheaton, IL 60187

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

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OFFICERS/DIRECTORS (CONTINUED)

V

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

D

Segert, Paul F.
1345 E. Gartner Road
Naperville, IL 60540

V

Shea, Thompson
97 Holmes Road
Ridgefield, CT 06877

D

Skubisz, Joseph F.
105 Mescallero Court
Naperville, IL 60563

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

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OFFICERS/DIRECTORS (CONTINUED)

V

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

V

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

T

Ziber, Henry J.
2243 Gleneagles Drive
Naperville, IL 60563