

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Pandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 846967 (8)
1. Corporation Name
PRUDENTIAL COMMERCIAL INSURANCE COMPANY

Principal Place of Business 1111 DURHAM AVE. SOUTH PLAINFIELD NJ 07080	Mailing Address 1111 DURHAM AVE. SOUTH PLAINFIELD NJ 07080-2305
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2. Principal Place of Business 21 23 Main Street Suite, Apt. #, etc.		2a. Mailing Address 26 23 Main Street Suite, Apt. #, etc.		3. Date Incorporated or Qualified 09/16/1990	3a. Date of Last Report 05/01/1996
22 City & State 23 Holmdel, NJ		27 City & State 28 Holmdel, NJ		4. FEI Number 22-2227331	Applied For Not Applicable
24 Zip 07733		25 Country Monmouth		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
26 Zip 07733		27 Country Monmouth		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
28 Zip 07733		29 Country Monmouth		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent THE INSURANCE COMMISSIONER OF FLORIDA THE STATE CAPITOL BLDG 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	
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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	CD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YELVERTON, WILLIAM F	1.2 NAME	
STREET ADDRESS	751 BROAD STREET	1.3 STREET ADDRESS	
CITY - ST - ZIP	NEWARK NJ 07102	1.4 CITY - ST - ZIP	
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRAWFORD, THOMAS W	2.2 NAME	
STREET ADDRESS	1111 DURHAM AVE.	2.3 STREET ADDRESS	
CITY - ST - ZIP	SOUTH PLAINFIELD NJ 07080	2.4 CITY - ST - ZIP	
TITLE	SS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, CARL A	3.2 NAME	
STREET ADDRESS	1111 DURHAM AVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	SOUTH PLAINFIELD NJ 07080	3.4 CITY - ST - ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENCOSKI, NICHOLAS A	4.2 NAME	
STREET ADDRESS	1111 DURHAM AVE.	4.3 STREET ADDRESS	
CITY - ST - ZIP	SOUTH PLAINFIELD NJ 07080	4.4 CITY - ST - ZIP	
TITLE	VPA	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHEPARD, LINDA A	5.2 NAME	
STREET ADDRESS	1111 DURHAM AVE.	5.3 STREET ADDRESS	
CITY - ST - ZIP	SOUTH PLAINFIELD NJ 07080	5.4 CITY - ST - ZIP	
TITLE	VPD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRESLIN, WILLIAM J	6.2 NAME	
STREET ADDRESS	1111 DURHAM AVE.	6.3 STREET ADDRESS	
CITY - ST - ZIP	SOUTH PLAINFIELD NJ 07080	6.4 CITY - ST - ZIP	

14. I do 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 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:  4/25/97 (908) 946-5528
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

**PRUDENTIAL COMMERCIAL INSURANCE COMPANY
LIST OF PRINCIPAL DIRECTORS AND OFFICERS
BUSINESS ADDRESSES**

DIRECTORS

Thomas Wayne Crawford
23 Main Street
Holmdel, New Jersey 07733

Richard Milton Green
23 Main Street
Holmdel, New Jersey 07733

Mark Brown Grier
751 Broad Street
Newark, New Jersey 07102

Joyce Robinson Leibowitz
80 Livingston Avenue
Roseland, New Jersey 07068-1701

Thomas Ernest Minerva
80 Livingston Avenue
Roseland, New Jersey 07068-1701

Richard Otto Painter
1111 Durham Avenue
South Plainfield, New Jersey 07080

Anthony Steven Pizel
213 Washington Street
Newark, New Jersey 07102-2992

Isaac Edward Price
213 Washington Street
Newark, New Jersey 07102-2992

John Vincent Scicutella
80 Livingston Avenue
Roseland, New Jersey 07068-1701

William Frisby Yelverton
751 Broad Street
Newark, New Jersey 07102

OFFICERS

William Frisby Yelverton
751 Broad Street
Newark, New Jersey 07102

Thomas Wayne Crawford
23 Main Street
Holmdel, New Jersey 07733

Richard Milton Green
23 Main Street
Holmdel, New Jersey 07733

Paul Gerard O'Leary
100 Mulberry Street
Newark, New Jersey 07101

Linda Ann Shepherd
23 Main Street
Holmdel, New Jersey 07733

Carl Arthur Peterson
23 Main Street
Holmdel, New Jersey 07733

Nicholas Adam Hencoski
23 Main Street
Holmdel, New Jersey 07733

Chairman of the Board

President and Chief Executive Officer

Vice President and Comptroller

Financial Vice President

Vice President and Actuary

Chief Legal Officer and Secretary

Treasurer

As of 12/31/96