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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 850651

(1)

SECURITY REINSURANCE COMPANY

Principal Place of Business		Mailing Address			4 140107 19191 VIII VIII V	a i i 4 di i 1 di i 1 di i 1	ırğıl <b>biğil ği</b> l	#11 #1#11 #1##	PTW11 1891	
9 Farm Springs D Farmington CT 06		9 FARM SPRINGS OR FARMINGTON CT 06032-2569								
						3. Date Incorporate 10/08/1981	ed or Qualified	,	ite of Last F 3/1996	leport
2. Principal Place of Business		2a. Mailing Address			4. FEI Number				oplied For	
Suite, Apt. #, etc		26			06-1008792				ot Applicabl	
Suite, Apr. #, 6t	я(;	Suite, Apt. #, etc.				5. Certificate of Sta	itus Desired			Additional equired
City & State		City & State				6. Election Campai	gn Financing		\$5.00	May Be
23		28				Trust Fund Cont	<del>-</del>		Added	to Fees
Ζφ 2 <b>4</b>	Country	Zip	30	ountry		8. This corporation Florida Statutes			tax under s ⊒ No	. 199.032,
9	). Name and Address of Curre		30	T		10. Name and Add				
INSURAN	NCE COMMISSIONER				Name					···
STATE OF FLORIDA			82 Street Add		Street A	dress (P.O. Box Number is Not Acceptable)				
CAPITAL BLDG				83						
IALLAHA	ASSEE FL 32301			83						
				84	City			FL	<b>85</b> Zip	Code
11. Pursuant to th	ne provisions of Sections 607.05	02 and 607.1508, Florida St	atutes, the	above	-named o	corporation submits this sta	tement for the p	urpose of	changing i	ts registere
<ul> <li>office or regist</li> </ul>	stered agent, or both, in the Stat amiliar with, and accept the obli	te of Florida. Such change w loations of Section 607 0505	as authoriz Elozida Str	ed by atutes	the corp	oration's board of directors	. I hereby accep	ot the app	ointment as	registered
agent Lamifa			, , ,							
agent Lam fa			•							
agent Lam fa SIGNATURE 5 g =	ators typing or protestinance of legistered B	gent and litle if applicable	NOTE: Register	red Age	nt signature r	equired when reinstating)	NGES TO OFFIC	DATE CDC AND	DIRECTO	OC 181 12
agent Lam fa SIGNATURE 5 9	Zuv - typed or princklasive allieg stered in OFFICERS AI		NOTE: Register	red Age	· · · · · ·	ADDITIONS/CHAI	NGES TO OFFIC		DIRECTO	
agent I am fa SIGNATURE 5 g - 12.	abio - typed or period name of registered a OFFICERS AI	gent and little of applicable	NOTE: Register 13	red Age	· · · · · ·		NGES TO OFFIC			
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SIGNATURE:

SIGNATURE DID TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR

(860) 674-2512

**FILED** 

Apr 30 1997 8:00am

Secretary of State

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