## **2004 FOR PROFIT CORPORATION**

## May 25, 2004 8:00 am **ANNUAL REPORT** Secretary of State DOCUMENT # F00000002861 05-25-2004 90001 024 \*\*\*550.00 1 Entity Name CONSTITUTION INSURANCE COMPANY Principal Place of Business Mailing Address 717 FIFTH AVENUE 717 FIFTH AVENUE 24076927 NEW YORK, NY 10022-8101 NEW YORK, NY 10022-8101 2. Principal Place of Business 3. Mailing Address **717 FIFTH AVENUE** 717 FIFTH AVENUE Suite, Apt. #, etc. Suite, Apt. #, etc 03072003 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 13-2798872 Not Applicable NEW YORK. NEW YORK, NY Country Country Zip Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 10022 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATE SERVICE COMPANY CORPORATE SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET 1201 HAYS STREET TALLAHASSEE, FL 32301 Zip Code TALLAHASSEE. 32301 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Delete TITLE K Change ☐ Addition TITLE KANN, ACHIM KNIPPER: STEPHAN NAME NAME STREET ADDRESS **GEREONSHOF D-50660** STREET ADDRESS GEREONSHOF D-506603 COLOGNE, GERMANY, DE 50660 CITY-ST-ZIP COLOGNE GERMANY, CITY-ST-ZIP Delete Change ■ Addition TITLE TITLE NAME MCCAFFERTY, KEVIN NAME BUNAES, BARD E. STREET ADDRESS 717 FIFTH AVE STREET ADDRESS 717 FIFTH AVENUE CITY-ST-ZIP CITY-ST-ZIP NEW YORK, NY 10022 NEW YORK, NY 10022 Delete Ki Change ☐ Addition TITLE TITLE McGEOUGH, THOMAS J. SMITH, DAVID W NAME 717 FIFTH AVENUE STREET ADDRESS STREET ADDRESS 717 FIFTH AVE. NEW YORK, NY 10022 CITY-ST-ZIP NEW YORK, NY 10022 CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE TANNERT, MICHAEL NAME NAME FINKELSTEIN, BRIAN W. 717 FIFTH AVE. STREET ADDRESS STREET ADDRESS 717 FIFTH AVENUE CITY-ST-ZIP NEW YORK, NY 10022 CITY-ST-ZIP NEW YORK, NY 10022 SVP Change Addition TITLE TITLE Delete KEOGH, BARRY FINKELSTEIN, BRIAN NAME NAME 717 FIFTH AVENUE STREET ADDRESS STREET ADDRESS 717 FIFTH AVE. NEW YORK, NY 10022 CITY-ST-ZIP NEW YORK, NY 10022 CITY-ST-ZIP Delete **VP** ☐ Change X Addition TITLE TITLE

12. 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 10 or Block 11 if changed, or on an attach th all other like empowered.

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FINKELSTEIN, BRIAN W. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 13, 2004

FLETCHER, JAMES

717 FIFTH AVENUE NEW YORK, NY 10022

(212)754-7525

FILED