

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90122 027 ***150.00

DOCUMENT # F00000002861
 1. Entity Name
CONSTITUTION INSURANCE COMPANY



Principal Place of Business: **1345 AVENUE OF THE AMERICAS, 20TH FLOOR, NEW YORK, NY 10105**
 Mailing Address: **1345 AVENUE OF THE AMERICAS, 20TH FLOOR, NEW YORK, NY 10105**

40081648



2. Principal Place of Business - No P.O. Box #: **7 Times Square, 37th Floor, Times Square Tower**
 3. Mailing Address: **7 Times Square, 37th Floor, Times Square Tower**

04162008 Chg-P CR2E034 (12/06)

City & State: **New York, NY 10036**

4. FEI Number: **13-2798872**
 Applied For: Not Applicable

Zip: **10036** Country: **U.S.A.**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E. GAINES ST.
TALLAHASSEE, FL 32399

7. Name and Address of New Registered Agent
 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. 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) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C KANN, ACHIM IM MEDIA PARK 48 COLOGNE, GERMANY, 50670	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete P BUNAES, BARD E 1345 AVENUE OF THE AMERICAS, FLR-20 NEW YORK, NY 10105	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Times Square, 37th Floor New York, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete EVPS SMITH, DAVID W 1345 AVE OF THE AMERICAS 20TH FLOOR NEW YORK, NY 10105	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Times Square, 37th Floor New York, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete EVP BURTON, HENRY I 1345 AVE OF THE AMERICAS 20TH FLR NEW YORK, NY 10105	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Henry, Burton I. 7 Times Square, 37th Floor New York, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete SVP HILL, THOMAS 1345 AVE OF THE AMERICAS 20TH FLR NEW YORK, NY 10105	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Times Square, 37th Floor New York, NY 10036
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete SVP FLETCHER, JAMES 1345 AVENUE OF THE AMERICAS, FLR-20 NEW YORK, NY 10105	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7 Times Square, 37th Floor New York, NY 10036

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 attachment with an address, with all other like empowered

SIGNATURE: *Henry I. Burton* **Henry I. Burton**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/14/08
Date