## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	F95000002405	(7)
t. Carragion Name		` '

#### CHUBB INDEMNITY INSURANCE COMPANY

Principal Place of Business 15 MOLINTAIN VIEW BOAD Mailing Address

15 MOUNTAIN VIEW BOAD


WARREN NJ	N VIEW RUAU 07059	WARREN NJ 07059	HUAU						
						3. Date Incorporated or Qualified 05/17/1995	3a. Date	of Last Re	eport
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				22-3291862	···		Not Applicable
Suite, Apt. #	t, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired			Additional Required
City & State		Oity & State				Election Campaign Financing     Trust Fund Contribution			May Be
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for	intangible ta	_	
24	25	29	30			Florida Statutes	□ No		
	g. Name and Address of Current	Registered Agent		· · · ·		10. Name and Address of New F	legistered	Agent	
				81	Name				
INSURA	NCE COMMISSIONER			82	Street /	Address (P.O. Box Number is Not Acceptate	ole)		
CAPITO	<u> </u>								
TALLAH	ASSEE FL 32399-0300			83					
				84	City			85 Zu	Code
							FL		
familiär wit SIGNATURE	ed agent, or both, in the State of Figure  In, and accept the obligations of Section  Signature, tiped or protect name of regoldered agent or	n 607.0505, Florida Statute:	S.			board of directors. Thereby accept the app	Organiest as	registered	agent. Lain
12.	OFFICERS AND		13.		: g-12-0	ADDITIONS/CHANGES TO OFF		DIRECTO	IRS IN 12
TITLE	CD	☐ DELETE	1 1 11	1LF			[	Change	Addition
NAME	O'HARE, DEAN R		1.2 NA	3M					
STREET ADDRESS	15 MOUNTAIN VIEW ROAD		1381	REE L	ADDRESS				
CITY - ST - ZIP	WARREN NJ		1.4 CI	IY - \$1	I - ZIP				
TITLE	VSD	DELETE	2 1 (			VAD	)	Change	Addition
NAME	HARTMAN, DAVID G		2.2 %	ME.				•	
STREET ADDRESS	15 MOUNTAIN VIEW ROAD		2 3 ST	REET.	ADDRESS				
CITY-ST-ZIP	WARREN NJ		2 4 CI	TY - S1	r ZIP				
TITLE	VSD	DELETE	3 1 1					Change	☐ Addition
NAME	GULICK, HENRY G		3.2 NA	ME					
STREET ADDRESS	15 MOUNTAIN VIEW ROAD		33 S	IREET	ADDRESS				
CITY - ST - ZIP	WARREN NJ		340						
TITLE	VTD	☐ DELETE	4 1 II				{	Change	Addition
NAME	SEMPIER, PHILIP J		4 2 N/	AME					
STREET ADDRESS	15 MOUNTAIN VIEW ROAD		43 ST	HEET	ADDRESS				
CITY - ST - ZIP	WARREN NJ		4.4 C)	[V - S	T - 712				
TITLE	VD	☐ DELETE	5 1 T				[	Change	Addition
NAME	CRAWFORD JR, ROBERT P		52 N	AME					
STREET ADDRESS	15 MOUNTAIN VIEW ROAD		5381	REFI	ADDRESS				
CITY-ST-ZIP	WARREN NJ		5 4 CI						
TITLE	VD	☐ DELETE	6 1 T	-				Change	Addition
NAME	HYER JR. FREDERICK L		6 2 N	AME.					
STREET ADDRESS	15 MOUNTAIN VIEW ROAD				ADDRESS				
CITY-ST-ZIP	WARREN NJ		640						
14 I do hereh	v certify that the information supplied w	th this films is voluntarily fur				lify for the exemption stated in Section 119	OZ/3)(k) Eld	onda Statu	tes I further

roo nereby ceruly 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:

Henry G. Gulick

4/25/96 (908) 903-3579

Pg 283

# STATE OF FLORIDA DEPARTMENT OF STATE

### **CORPORATION ANNUAL REPORT - 1996**

# CHUBB INDEMNITY INSURANCE COMPANY

Question 12. (cont'd)

		<b>,</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	7. D Devlin, Gail E. 15 Mountain View Road Warren, NJ 07059	TITLE NAME STREET ADDRESS CITY-SI-ZIP	□CHANGE □ADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	8. D Duffy, David L. 15 Mountain View Road Warren, NJ 07059	TITLE NAME STREET ADDRESS CITY-ST-ZIP	□change □addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE  9. D. Fay, George R. 15 Mountain View Road Warren, NJ 07059	TITLE NAME STREET ADDRESS CITY-ST-ZIP	□change □addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DDELETE  10. D  Fowler, David S.  15 Mountain View Road  Warren, NJ 07059	TITLE NAME STREET ADDRESS CITY-ST-ZIP	□change □addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	11. D Guzzo, Walter P. 333 Earl Ovington Blvd. Uniondale, NY 11553-3644	TITLE NAME STREET ADDRESS CITY-ST-ZIP	□change □addition

-2-

Pg-383

# STATE OF FLORIDA DEPARTMENT OF STATE

### **CORPORATION ANNUAL REPORT - 1996**

#### CHUBB INDEMNITY INSURANCE COMPANY

Question 12. (cont'd) □CHANGE □ADDITION DDELETE TITLE TITLE 12. D NAME NAME Heard, Gary L. 15 Mountain View Road STREET ADDRESS STREET ADDRESS Warren, NJ 07059 CITY-ST-ZIP CITY-ST-ZIP □CHANGE □ADDITION DELETE TITLE TITLE 13. VD NAME NAME Luchs, Charles M. 15 Mountain View Road STREET ADDRESS STREET ADDRESS Warren, NJ 07059 CITY-ST-ZIP CITY-ST-ZIP CHANGE DADDITION DELETE TITLE TITLE 14. V NAME NAME Burton, Malcolm B. 15 Mountain View Road STREET ADDRESS STREET ADDRESS Warren, NJ 07059 CITY-ST-ZIP CITY-ST-ZIP CHANGE DADDITION DELETE TITLE TITLE 15. V NAME NAME Lynch, Amelia C. 15 Mountain View Road STREET ADDRESS STREET ADDRESS Warren, NJ 07059 CITY-ST-ZIP CITY-ST-ZIP □CHANGE □ADDITION DELETE TITLE TITLE 16. V NAME NAME Marzocchi, Robert A. 15 Mountain View Road STREET ADDRESS STREET ADDRESS Warren, NJ 07059 CITY-ST-ZIP CITY-ST-ZIP