

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 22, 2000 8:00 am**  
**Secretary of State**

08-22-2000 90001 014 \*\*\*550.00

**DOCUMENT # F99000006550**

1. Entity Name

**SENTINEL INSURANCE COMPANY, LTD.**

Principal Place of Business

**HARTFORD PLAZA  
 HARTFORD CT 06115**

Mailing Address

**HARTFORD PLAZA  
 HARTFORD CT 06115**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

*Hartford plaza*

*T-16-85*

*Hartford, Connecticut*

*06115*



DO NOT WRITE IN THIS SPACE

4. FEI Number **06-1552103**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**INSURANCE COMMISSIONER  
 THE CAPITOL BLDG.  
 TALLAHASSEE FL 32399-000**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DSVS	MINOR O'HALLORAN, CHARLES		
HARTFORD PLAZA	HARTFORD CT 06115		
DP	ROBB, DAVID RICHARD		
HARTFORD PLAZA	HARTFORD CT 06115		
DSVG	WILDER, MICHEAL S		
HARTFORD PLAZA	HARTFORD CT 06115		
SVC	GIAMALIS, JOHN NICOLAS		
HARTFORD PLAZA	HARTFORD CT 06115		
T	GARRETT, JAMES RICHARD		
HARTFORD PLAZA	HARTFORD CT 06115		
SVAS	SALVE, PATRICK JAMES		
HARTFORD PLAZA	HARTFORD CT 06115		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment # F9900000 6551  
DOL D0080182



August 16, 2000

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Enclosed please find the 2000 uniform Business Report and check for Sentinel Insurance Company, Ltd. of Hartford Insurance Group.

If there are any questions, please call me at (860) 547-2770.

Sincerely,

A handwritten signature in black ink that reads "Liping Yuan". The signature is written in a cursive, flowing style.

Liping Yuan  
Insurance Accountant, Controllers FAR&R

Enclosures