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May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00572 (8)

1. Corporation Name
METLIFE GENERAL INSURANCE AGENCY, INC.

Principal Place of Business

ONE MADISON AVE.
AREA 8FG
NEW YORK NY 10010
US

Mailing Address

ONE MADISON AVE.
AREA 8FG
NEW YORK NY 10010-3803
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified

01/12/1984

3a. Date of Last Report

05/01/1996

4. FEI Number

13-3179826

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FLORIDA INSURANCE COMMISSIONER
THE CAPITOL BLDG
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME ARONSON, RICHARD R
STREET ADDRESS ONE MADISON AVE
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE T
NAME PANETTA, JOSEPH M
STREET ADDRESS ONE MADISON AVE
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE V
NAME SALERNO, ANTHONY C
STREET ADDRESS ONE MADISON AVE
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE S
NAME SHUMAN, IRA H
STREET ADDRESS ONE MADISON AVE
CITY-ST-ZIP NEW YORK NY ☐ DELETE

TITLE D
NAME DONNELLY, VINCENT J.
STREET ADDRESS ONE MADISON AVE
CITY-ST-ZIP NEW YORK NY ☒ DELETE

TITLE AV
NAME BRASH, STEVEN J
STREET ADDRESS ONE MADISON AVE
CITY-ST-ZIP NEW YORK NY ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE DIRECTOR ☒ Change ☐ Addition
5.2 NAME JORDAN, JOSEPH W.
5.3 STREET ADDRESS ONE MADISON AVE
5.4 CITY-ST-ZIP NEW YORK NY 10010

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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

STEVEN J. BRASH

CR2E034 (9/96)

METLIFE GENERAL INSURANCE AGENCY, INC.

YEAR 1996

EIN: 13-3179826

OFFICERS

<u>Name</u>	<u>Title</u>	<u>Address</u>
David G. Martin	Chairman of the Board,	4054 Broadmoor Circle Naperville IL 60564
Richard R. Aronson	President and Chief Operating Officer	266 Evangeline Drive Mandeville, LA 70448
Anthony C. Salerno	Vice-President	808 Broadway, Apt. 6D New York, NY 10003
John T. Thompson	Vice-President	3725 Corinne Avenue Chalmette, LA 70043
Michael F. Toomey	Vice-President	20 Loblolly Ct. Manderville, LA 70448
Steven J. Brash	Assistant Vice-President	332 East 84th Street New York, NY 10028
Leo R. Brown	Assistant Vice-President	20 Valley Road Glen Rock, NJ 07452
Ira H. Shuman	Secretary	436 Abemarle Road Cedarhurst, NY 11516
Joseph M. Panetta	Treasurer	22 Sherman Road Glen Cove, NY 11542
Rick Mitchell	Controller	4250 Nottingham Drive Danville, CA 94506

The business address for all officers and directors is: One Madison Avenue - Area 8-FG, New York, NY 10010 960ffr.wpd 7

METLIFE GENERAL INSURANCE AGENCY, INC.

YEAR 1997

EIN: 13-3179826

DIRECTORS

<u>Name</u>	<u>Title</u>	<u>Address</u>
Richard R. Aronson	Director	266 Evangeline Drive Mandeville LA 70448
Gregory J. Doby	Director	27 Providence Drive Princeton Junction, NJ 08550
William D. Moore	Director	1600 Charlemagne Drive Hoffman Estates, IL 60195
Elliot Reiter	Director	9 Bard Place Old Bridge, NJ 08857
Robert W. Powell	Director	6 Timber Knoll Drive Washington Crossing, PA 18977
Joseph W. Jordan	Director	440 East 23 rd Street New York, NY 10010
Lawrence J. Brewster	Director	38 Back River Way Duxbury, MA 02332
John E Schmidt	Director	517 Beau Chene Drive Mandeville, LA 70448
Harold B Left	Director	29 Shoreham Drive West Dix Hills, NY 11746
David G Martin	Director	4054 Broadmoor Circle Naperville, IL 60564

The business address for all officers and directors is: One Madison Avenue - Area 8-FG, New York, NY 10010