

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

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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P92000009612 (2)

1. Corporation Name
DEL HARBOR, INC.



Principal Place of Business
**260 LONG RIDGE ROAD
STAMFORD CT 06927**

Mailing Address
**P.O. BOX 9552
ATTN: SHANNON WILLIAMS
FT MYERS FL 33906-9552
US**

3. Date Incorporated or Qualified 12/07/1992	3a. Date of Last Report 05/01/1995
4. FEI Number 65-0384224	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Dept. 8109
22 City & State	27 260 Long Ridge Rd.
23 Zip	28 Stamford, Ct 06927-9621
24 Country	30 Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMULEC, ANDREW P	1.2 NAME	
STREET ADDRESS	499 THORNALL ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	EDISON NJ 08837	1.4 CITY - ST - ZIP	
TITLE	DP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SASSAMAN, DENNIS	2.2 NAME	
STREET ADDRESS	499 THORNALL ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	EDISON NJ 08837	2.4 CITY - ST - ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHERER, BRADLEY A	3.2 NAME	
STREET ADDRESS	1601 BLEVEDERE RD., #110E	3.3 STREET ADDRESS	
CITY - ST - ZIP	W. PALM BEACH FL 33401	3.4 CITY - ST - ZIP	
TITLE	AS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURGWINKLE, MARY E	4.2 NAME	
STREET ADDRESS	499 THORNALL ST.	4.3 STREET ADDRESS	
CITY - ST - ZIP	EDISON NJ	4.4 CITY - ST - ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLER, KAREN H	5.2 NAME	
STREET ADDRESS	499 THORNALL ST.	5.3 STREET ADDRESS	
CITY - ST - ZIP	EDISON NJ	5.4 CITY - ST - ZIP	
TITLE	S	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPERGER, JOHN M	6.2 NAME	
STREET ADDRESS	499 THORNALL ST.	6.3 STREET ADDRESS	
CITY - ST - ZIP	EDISON NJ	6.4 CITY - ST - ZIP	

SEE ATTACHED

**800001779848
-04/15/96--01037--006
***200.00**

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14. I do hereby certify 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, change 1, or on an attachment with an address.

SIGNATURE:

Robert J. Buckley 4/8/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (12/95)

2-2

685

Del Harbor, Inc.
65-0384224

4/4/96

Name	Title	Business Address
David B. Henry	Director	260 Long Ridge Road Stamford CT 06927
Michael D. Frazier	Director	260 Long Ridge Road Stamford CT 06927
Robert E. Pfeiffer	Director	260 Long Ridge Road Stamford CT 06927
Michael D. Frazier	President	260 Long Ridge Road Stamford CT 06927
David B. Henry	Vice President	260 Long Ridge Road Stamford CT 06927
D. R. Martindale	Vice President	260 Long Ridge Road Stamford CT 06927
Robert E. Pfeiffer	Vice President	260 Long Ridge Road Stamford CT 06927
David B. Henry	Secretary	260 Long Ridge Road Stamford CT 06927
Patricia A. Deluca	Assistant Secretary	260 Long Ridge Road Stamford CT 06927
Joan C. Amble	Treasurer	260 Long Ridge Road Stamford CT 06927
Robert J. Buckley	Vice President	777 Long Ridge Road Stamford CT 06927
Gary J. Schutman	Assistant Treasurer	777 Long Ridge Road Stamford CT 06927