


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

07 MAY -3 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10fz

DOCUMENT # 251884 1. Entity Name STARR MARINE AGENCY OF FLORIDA, INC.	
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Principal Place of Business 90 PARK AVENUE, 7TH FLOOR NEW YORK, NY 10016	Mailing Address 90 PARK AVENUE, 7TH FLOOR NEW YORK, NY 10016
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DO NOT WRITE IN THIS SPACE



04242007	No Chg-P	CR2E034 (11/05)	07
4. FEI Number 13-1950147		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, SUITE 105 TALLAHASSEE, FL 32301

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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 <u>Amanda Roath</u> <small>Signature typed or printed name of registered agent and title if applicable</small>	As its agent <u>05-03-2007</u> <small>(NOTE: Registered Agent signature required when reinstating) DATE</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD FRENCH, DAVID S 90 PARK AVENUE, 7TH FLOOR NEW YORK, NY 10016
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPS HARTMANN, GEORGE H 90 PARK AVENUE, 7TH FLOOR NEW YORK, NY 10016
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T WARANTZ, MICHAEL D 399 PARK AVENUE, 17TH FLOOR NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPD MCBONNELL, DANIEL P 399 PARK AVENUE, 17TH FLOOR NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D ROBERTS, JOHN J 399 PARK AVENUE, 17TH FLOOR NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

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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 reports 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: <u>George Hartmann</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	George Hartmann, VP., Sec. & Comptroller <u>4/26/07</u> <small>Date Daytime Phone</small>



CORPORATION SERVICE COMPANY

2082

ACCOUNT NO. : 072100000032

REFERENCE : 878411 4312639

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 150.00

ORDER DATE : May 2, 2007

ORDER TIME : 10:18 AM

ORDER NO. : 878411-030

CUSTOMER NO: 4312639

ANNUAL REPORT FILING

NAME: STARR MARINE AGENCY OF
FLORIDA, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Roath - Ext. 2955

EXAMINER'S INITIALS: _____

RECEIVED
07 MAY -3 AM 10:50
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA