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Apr 08 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 # 581872 (9)

1. Corporation Name  
SENTINEL COMMUNITIES, INC.

Principal Place of Business  
C/O RPC-MITCHELL/TITUS INC  
440 E. SWEDES FORD RD STE 2000  
WAYNE PA 19087  
US

Mailing Address  
C/O RPC-MITCHELL/TITUS INC  
440 E. SWEDES FORD RD STE 2000  
WAYNE PA 19087-1820  
US



2. Principal Place of Business  
21 C/O FDC, SUBSIDIARIES

Suite, Apt. #, etc.  
22 101 EAST RIVER DRIVE

City & State  
23 EAST HARTFORD, CT

Zip  
24 06108

Country  
25 USA

2a. Mailing Address  
26 C/O FDC, SUBSIDIARIES

Suite, Apt. #, etc.  
27 P.O. BOX 280402

City & State  
28 EAST HARTFORD, CT

Zip  
29 06128-0402

Country  
30 USA

3. Date Incorporated or Qualified  
08/09/1978

3a. Date of Last Report  
07/01/1996

4. FEI Number  
59-1838723

Applied For  
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME MAYER, MARVIN S  
STREET ADDRESS 101 E RIVER DR  
CITY-ST-ZIP E HARTFORD CT

TITLE VD  
NAME FEIL, JOHN  
STREET ADDRESS 101 E RIVER DR  
CITY-ST-ZIP E HARTFORD CT

TITLE STD  
NAME GIESE, JOANNE  
STREET ADDRESS 101 E RIVER DR  
CITY-ST-ZIP E HARTFORD CT

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT/DIRECTOR  
1.2 NAME WALLACE, JEROME DANO  
1.3 STREET ADDRESS C/O FDC, SUBSIDIARIES  
1.4 CITY-ST-ZIP 101 EAST RIVER DRIVE EAST HARTFORD, CT 06108

2.1 TITLE VP  
2.2 NAME CHARLES LEE TUCKER  
2.3 STREET ADDRESS Same address as above  
2.4 CITY-ST-ZIP

3.1 TITLE S/T  
3.2 NAME HENRY DEAN VERNON  
3.3 STREET ADDRESS Same address as above  
3.4 CITY-ST-ZIP

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

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
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:

W. JEROME DANO, PRESIDENT 3/31/97 (860) 291-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0007606

CR2E034 (9/96)