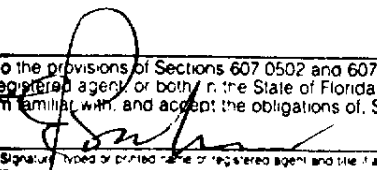


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jun 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 803638 (6) 1. Corporation Name HARTFORD FIRE INSURANCE COMPANY			
Principal Place of Business HARTFORD PLAZA HARTFORD CT 06115		Mailing Address HARTFORD PLAZA HARTFORD CT 06115	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 HARTFORD PLAZA Suite, Apt. #, etc. 27 T-16-85 City & State 28 Hartford CT Zip 29 06115 Country 30	
3. Date Incorporated or Qualified 02/03/1930		4. FEI Number 06-0383750 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	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		8. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent BUCKALEW, EDWARD J 101 SOUTHAL LANE MAITLAND FL 32751		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 5/18/98	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD DONAHUE, JOHN HARTFORD PLAZA HARTFORD CT 06115 ☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	V/D Donahue, John F. Hartford Plaza Hartford, CT 06115 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD WILDER, MICHAEL S. HARTFORD PLAZA HARTFORD CT ☒ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	V/D Wilder, Michael S. Hartford Plaza Hartford, CT 06115 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WESTERVELT, JAMES J HARTFORD PLAZA HARTFORD CT ☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	V/D Westervelt, James J. Hartford Plaza Hartford, CT 06115 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOD AYER, RAMANI HARTFORD PLAZA HARTFORD CT ☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	P/C/D Ayer, Ramani Hartford Plaza Hartford, CT 06115 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD O'HALLORAN, CHARLES M HARTFORD PLAZA HARTFORD CT 06115 ☒ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	V/S/D O'Halloran, Charles M. Hartford Plaza Hartford, CT 06115 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. 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 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.

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Page 2 of 2

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 803638 (6)

1. Corporation Name
HARTFORD FIRE INSURANCE COMPANY

Principal Place of Business

HARTFORD PLAZA
HARTFORD CT 06115

Mailing Address

HARTFORD PLAZA
HARTFORD CT 06115

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/03/1930

4. FEI Number

06-0383750

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc

26

Suite, Apt. #, etc

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BUCKALEW, EDWARD J
101 SOUTHAL LANE
MAITLAND FL 32751

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	SVPD	☐ DELETE
NAME	DONAHUE, JOHN	
STREET ADDRESS	HARTFORD PLAZA	
CITY - ST - ZIP	HARTFORD CT 06115	
TITLE	SVPD	☐ DELETE
NAME	WILDER, MICHAEL S.	
STREET ADDRESS	HARTFORD PLAZA	
CITY - ST - ZIP	HARTFORD CT	
TITLE	VD	☐ DELETE
NAME	WESTERVELT, JAMES J	
STREET ADDRESS	HARTFORD PLAZA	
CITY - ST - ZIP	HARTFORD CT	
TITLE	PCOD	☐ DELETE
NAME	AYER, RAMANI	
STREET ADDRESS	HARTFORD PLAZA	
CITY - ST - ZIP	HARTFORD CT	
TITLE	SVPD	☐ DELETE
NAME	O'HALLORAN, CHARLES M	
STREET ADDRESS	HARTFORD PLAZA	
CITY - ST - ZIP	HARTFORD CT 06115	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	Smith, Lowndes A.	
1.3 STREET ADDRESS	Hartford Plaza	
1.4 CITY - ST - ZIP	Hartford, CT 06115	
2.1 TITLE	V/D	☐ Change ☒ Addition
2.2 NAME	Gareau, Joseph H.	
2.3 STREET ADDRESS	Hartford Plaza	
2.4 CITY - ST - ZIP	Hartford, CT 06115	
3.1 TITLE	V/D	☐ Change ☒ Addition
3.2 NAME	Klein, David M.	
3.3 STREET ADDRESS	Hartford Plaza	
3.4 CITY - ST - ZIP	Hartford, CT 06115	
4.1 TITLE	V/D	☐ Change ☒ Addition
4.2 NAME	Zwiener, David K.	
4.3 STREET ADDRESS	Hartford Plaza	
4.4 CITY - ST - ZIP	Hartford, CT 06115	
5.1 TITLE	V/T/D	☐ Change ☒ Addition
5.2 NAME	Garrett, J. Richard	
5.3 STREET ADDRESS	Hartford Plaza	
5.4 CITY - ST - ZIP	Hartford, CT 06115	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. 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 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: