## **2004 FOR PROFIT CORPORATION ANNUAL REPORT**

## Apr 13, 2004 8:00 am Secretary of State **DOCUMENT #803638** 04-13-2004 90008 026 \*\*\*150.00 HARTFORD FIRE INSURANCE COMPANY Mailing Address Principal Place of Business 54032175 HARTFORD PLAZA HARTFORD PLAZA HARTFORD, CT 06115 T-16-85 HARTFORD, CT 06115 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04012004 CR2E034 (10/03) Chg-P Applied For City & State City & State 4. FEI Number 06-0383750 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHIEF FINANCIAL OFFICER Street Address (P.O. Box Number is Not Acceptable) P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. Change Ch ☐ Addition Delete TITLE TITLE GIAMALIS, JOHN N NAME GIAMALIS, JOHN N NAME HARTFORD PLAZA STREET ADDRESS STREET ADDRESS HARTFORD PLAZA HARTFORD, CT 06115 HARTFORD, CT 06115 CITY-ST-ZIP CITY-ST-7IP ☐ Change ■ Addition ☐ Delete TITLE TITLE PRICE, ROBERT NAME NAME HARTFORD PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HARTFORD, CT 06115 ☐ Addition ☐ Defete TITLE ☐ Change TITLE ZWIENER, DAVID K NAME NAME STREET ADDRESS HARTFORD PLAZA STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HARTFORD, CT 06115 Change ☐ Addition Delete TITLE CD TITLE AYER, RAMANI NAME AYER, RAMANI NAME STREET ADDRESS STREET ADDRESS HARTFORD PLAZA HARTFORD PLAZA HARTFORD, CT CITY-ST-ZIP HARTFORD, CT 06115 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition VS TITLE NAME BECKER, BRIAN S NAME STREET ADDRESS STREET ADDRESS HARTFORD PLAZA HARTFORD, CT 06115 CITY-ST-ZIP CITY-ST-7IP Addition L**≭** Delete TITLE ☐ Change TITLE D SMITH, LOWNDES A NAME JOHNSON, DAVID M NAME STREET ADDRESS HARTFORD PLAZA STREET ADDRESS HARTFORD PLAZA HARTFORD, CT 06115 CITY-ST-ZIP HARTFORD, CT 06115 CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

JOHN NICHOLAS GIAMALIS

VATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

04/02/04

Daytime Phone #

FILED