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

PROFIT CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

810795

(5)

**NEWARK INSURANCE COMPANY** 

FILED
Jun 09 1997 8:00am
Secretary of State



							118   118   118   118   118   118   118   118   118   118   118   118   118   118   118   118   118   118	
Principal Place of Business Mailing Address								
\$300 ARROWPOINT BLVD.   \$300 ARROWPOINT   P. O. BOX 1000   P. O. BOX 1000			.VD.					
CHARLOTTE		CHARLOTTE NC 28201-	1000					
US		US		3. Date incorporated or 02/07/1956	<b>I</b>	ate of Last Report 1/24/1996		
	lace of Business	2a. Mailing Address			4. FEI Number	·	Applied For	
21		26			13-5276670		Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status D	esired	\$8.75 Additional	
22 27				Fee Required			Fee Required	
City & Stat	е	<u> </u>	City & State			6. Election Campaign Financing \$5.00 May Be		
23			28			Trust Fund Contribution Added to Fees		
	Zip Country Zip			Country  8. This corporation has liability for inta				
24	25 2, Name and Address of Current	1 Registered Agent	30	Florida Statutes Yes No  10. Name and Address of New Registered Agent				
INC	SURANCE COMMISSIONER	i iioBioroien Wheiir		1 Name	TO, Maine and Address (	n new negistered i	-yen	
	E CAPITOL		L L					
	LLAHASSEE FL 32304			2 Street	Address (P.O. Box Number is No	Acceptable)		
170	ELATIAGOEE FL 32304			3				
	<i>2</i>			<u> </u>				
	1 · · · · · · · · · · · · · · · · · · ·		8	4 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 heroby accept the appointment as registered								
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heroby 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 agor	nt and title if applicable. (NO	III: Registered /	gent signature	required when resistating)	DATE		
12,	OFFICERS AND		13.		ADDITIONS/CHANGES	TO OFFICERS AND		
TITLE	C Prestopino, Frank J.	, DELETE	1.1 TITU				Change Addition	
NAME	9300 ARROWPOINT BLVD.		1.2 NAM		(See Attached SI	neet)		
STREET ADDRESS	CHARLOTTE NC			ET ADDRESS	,	,		
CITY-ST-ZIP TITLE	SVP	<b>™</b> DELETE		- S1 - ZIP -			Change Addition	
NAME	BRODERICK, TERRY	Ottere	2.1 TITL		,		☐ Change ☐ Addition	
STREET ADDRESS	9300 ARROWPOINT BLVD.		2.2 NAM		'/Soo Attached Si	~~~+\		
	CHARLOTTE NC			E1 ADDRESS	(See Attached Sh	ieer)		
CITY-ST-ZIP TITLE	T	DELETE	3 1 TITLE	'-ST-ZIP	and an analysis of the same		Change Addition	
NAME	KLINE, PHILIP E.	DELETE	32 NAM				En Autorities En Montroll	
STREET ADDRESS	9300 ARROWPOINT BLVD.			ET ADDRESS	(See Attached Sh	neet)		
CITY-ST-ZIP	CHARLOTTE NC			-ST-ZIP	, 200	,		
TITLE	V	DELETE	4.1 HTL				Change Addition	
NAME	AARON, NEAL C		4. 2 NAN				and arrange bank a reserved	
STREET ADDRESS	9300 ARROWPOINT BLVD.			ET ADDRESS	(See Attached Sh	neet)		
CITY-ST-ZIP	CHARLOTTE NC		4.4 CITY		,	,		
TITLE	OPC	DELETE	5.1 TITLE		<del></del> -		☐ Change ☐ Addition	
NAME	MENDELSOHN, ROBERT V		5.2 NAM				Notes of Control	
STREET ADDRESS	9300 ARROWPOINT BLVD.			ET ADDRESS				
CITY-ST-ZIP	CHARLOTTE NC		5.4 CITY	-	(See Attached Sh	neet)		
TITLE		DELETE	6.1 TITLE		<del></del>	· · · · · · · · · · · · · · · · · · ·	Change Addition	
NAME	AGLER, LARRY E	<b>7</b> "	6.2 NAM					
STREET ADDRESS	9300 ARROWPOINT BLVD.			E1 ADDRESS				
CITY-ST-ZIP	CHARLOTTE NC		6.4 CITY					
			9.1 9111		L			

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 eath; 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.

## All Additions

President
John David Reiersen
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Secretary
Jasper John Jackson
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Treasurer
Philbert Anthony Nezamoodeen
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Vice President
Michelle Ann Masotti
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Vice President
Gary Lloyd Ropiecki
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Vice President
Michael Joseph Serpico
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Vice President Brad Wagner 100 Charles Lindbergh Blvd. Uniondale, NY 11553

Vice President Robert Matthew Wallach 100 Charles Lindbergh Blvd. Uniondale, NY 11553

Director Roy Divittorio 100 Charles Lindbergh Blvd. Uniondale, NY 11553

Director
Lawrence Sigmund Isaacs
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Director
Jasper John Jackson
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Director Kenneth John Karasinski 100 Charles Lindbergh Blvd. Uniondale, NY 11553

Director Philbert Anthony Nezamoodeen 100 Charles Lindbergh Blvd. Uniondale, NY 11553

Director
John David Reiersen
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Director
Brad Wagner
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Director
Francis Wallach
100 Charles Lindbergh Blvd.
Uniondale, NY 11553

Director Robert Matthew Wallach 100 Charles Lindbergh Blvd. Uniondale, NY 11553

Director William Wallach 100 Charles Lindbergh Blvd. Uniondale, NY 11553

file: admin/new96