

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

**FILED**

**Feb 05 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # 812231 (9)**  
 1. Corporation Name  
**JEFFERSON INSURANCE COMPANY OF NEW YORK**



Principal Place of Business NEWPORT TOWER 525 WASHINGTON BLVD JERSEY CITY NJ 07310 US	Mailing Address NEWPORT TOWER 525 WASHINGTON BLVD JERSEY CITY NJ 07310 US
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>09/23/1957</b>	
21		26		4. FEI Number <b>13-5556470</b>	Applied For <input type="checkbox"/> Not Applicable
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24 Zip	25 Country	29 Zip	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent INSURANCE COMMISSIONER CAPITOL BLDG 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	85 Zip Code <b>FL</b>

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLAUS, CARDINAL	1.2 NAME	
STREET ADDRESS	525 WASHINGTON BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	JERSEY CITY NJ	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARKINS, JOSEPH	2.2 NAME	
STREET ADDRESS	525 WASHINGTON BLVD	2.3 STREET ADDRESS	
CITY-ST-ZIP	JERSEY CITY NJ	2.4 CITY-ST-ZIP	
TITLE	SV <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CELANO, VINCENT	3.2 NAME	
STREET ADDRESS	525 WASHINGTON BLVD	3.3 STREET ADDRESS	
CITY-ST-ZIP	JERSEY CITY NJ	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAINIS, EUGENE	4.2 NAME	
STREET ADDRESS	525 WASHINGTON BLVD	4.3 STREET ADDRESS	
CITY-ST-ZIP	JERSEY CITY NJ	4.4 CITY-ST-ZIP	
TITLE	TV <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GHIJLIOTTY, EDWIN	5.2 NAME	
STREET ADDRESS	525 WASHINGTON BLVD	5.3 STREET ADDRESS	
CITY-ST-ZIP	JERSEY CITY NJ	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSMEYER, HERBERT	6.2 NAME	
STREET ADDRESS	777 SAN MARIN DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	NOVATO CA	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: *Edwin Ghigliotti* *Herbert Hansmeyer* *1/16/98*

CR2E034 (10/97)