

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90306 036 ***150.00

DOCUMENT # 824539	
1. Entity Name GUY CARPENTER & COMPANY	

Principal Place of Business 121 RIVER STREET 5TH FLOOR HOBOKEN, NJ 07030	Mailing Address 121 RIVER STREET TAX DEPT., 5TH FL HOBOKEN, NJ 07030
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40071039



04072006 Chg-P CR2E034 (11/05)

4. FEI Number 13-4985720	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent - Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MEGNA, EDMUND JR ONE MADISON AVE, 4TH FL NEW YORK, NY 10010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEOD ZAFFINO, SALVATORE ONE MADISON AVE, 4TH FL NEW YORK, NY 10010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V GIGLIOTTI, JOSEPH 1166 AVE OF THE AMERICAS NEW YORK, NY 10036 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V STANICK, KEITH 121 RIVER STREET, 5TH FL HOBOKEN, NJ 07030 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S BORIK, MICHAEL ONE MADISON AVE, 4TH FL NEW YORK, NY 10010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: Joseph P. Gigliotti **JOSEPH P. GIGLIOTTI** 4/13/06 601-284-4397
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 40071039
#824539

Marsh & McLennan Companies
Tax Department - 5th floor
121 River Street
Hoboken, NJ 07030

April 18, 2006

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: **Guy Carpenter & Co, Inc.**
Document #: 824539

To Whom it May Concern,

On behalf of the above named corporation, please find the following enclosed:

1. 2006 Florida Corporation Reinstatement Form.
2. A check in the amount of \$150.

Please acknowledge receipt of the enclosed by stamping the duplicate of this letter and returning it in the stamped self-addressed envelope enclosed for you convenience.

Sincerely,



Evelyn Rodriguez
Jr. Tax Accountant

Enc.

ATTACHMENT

40071039

#824539
Marsh & McLennan Companies
Tax Department - 5th floor
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