2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2000 8:00 am
Secretary of State
05-01-2000 90466 004 ***150.00

DOCUMENT # 828899

1. Entity Name

DEAN WITTER REYNOLDS INSURANCE SERVICES, INC.

Principal Place of Business	Mailing Address
C/O MORGAN STANLEY DEAN WITTER & CO 1585 BROADWAY NEW YORK NY 10036	C/O MORGAN STANLEY DEAN WITTER & CO 1585 BROADWAY NEW YORK NY 10036-8200

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	c/o Morgan Stanley Tax Dept. Suite, Apt. #, etc. 1221 6th Avenue-23rd Floor
City & State	City & State New York, New York
Zip / Country	Zip / Country 10020 / USA

4. FEI Number 51-0116113 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ALECCI, FRANK M MACK CENTER IV, S 61, PARMAUS RD PARAMUS NJ 07652	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SERVER, ELLIOT M 2 WORLD TRADE CENTER, 74/F NEW YORK NY 10048	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SCHMITT, LEONARD J 2 WORLD TRADE CENTER, 74/F NEW YORK NY 10048	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ZAFRAN, FRANK 2 WORLD TRADE CENTER, 74/F NEW YORK NY 10048	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FITZPATRICK, DANIEL 2 WORLD TRADE CENTER, 65/F NEW YORK NY 10048	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT PALLADINO, LOU ~~2 WORLD TRADE CENTER, 23/F~~ ~~NEW YORK NY 10048~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ Change ☐ Addition 1221 Avenue of the Americas, 23rd Floor New York, New York 10020

CR2E034 (9/99)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Tom Palladino JURED 4-26-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #