

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90035 004 ***150.00

DOCUMENT # 837645

1. Entity Name **Commercial Union Risk Management, Inc.**

Principal Place of Business: **One Beacon St. Boston, MA 02108**

Mailing Address: **One Beacon St. Boston, MA 02108**

2. Principal Place of Business: Suite, Apt. #, etc. City & State Zip Country

3. Mailing Address: Suite, Apt. #, etc. City & State Zip Country

4. FEI Number: **04-2562637** Applied For: Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Talmudge, Carl P.
3751 McGuire Blvd.
Orlando, FL 32814-7575

7. Name and Address of New Registered Agent

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	
TITLE: Asst. VP ±	<input type="checkbox"/> Delete
NAME: Kenneth J. Paganni	
STREET ADDRESS: 17 State St., 16th Floor	
CITY-ST-ZIP: New York, NY 10004	
TITLE: Asst. Treasurer	<input type="checkbox"/> Delete
NAME: Robert S. Perlman	
STREET ADDRESS: One Beacon St.	
CITY-ST-ZIP: Boston, MA 02108	
TITLE: Treasurer	<input checked="" type="checkbox"/> Delete
NAME: John J. Higgins	
STREET ADDRESS: One Beacon St.	
CITY-ST-ZIP: Boston, MA 02108	
TITLE: _____	<input type="checkbox"/> Delete
NAME: _____	
STREET ADDRESS: _____	
CITY-ST-ZIP: _____	
TITLE: _____	<input type="checkbox"/> Delete
NAME: _____	
STREET ADDRESS: _____	
CITY-ST-ZIP: _____	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: George Y. Tsui	
STREET ADDRESS: 436 Walnut St.	
CITY-ST-ZIP: Philadelphia, PA 19106	
TITLE: Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME: Richard C. Hirtle	
STREET ADDRESS: One Beacon St., Boston, MA 02108	
CITY-ST-ZIP: _____	
TITLE: Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: Richard A. Jordan	
STREET ADDRESS: 100 Summer St., Boston, MA 02108	
CITY-ST-ZIP: _____	
TITLE: Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: Dennis R. Smith	
STREET ADDRESS: One Beacon St., Boston, MA 02108	
CITY-ST-ZIP: _____	
TITLE: Director/Sr. V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: Roger M. Singer	
STREET ADDRESS: One Beacon St., Boston, MA 02108	
CITY-ST-ZIP: _____	
TITLE: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: _____	
STREET ADDRESS: _____	
CITY-ST-ZIP: _____	

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: Dennis R. Smith **Dennis R. Smith, Secretary** Date: 6-1-00 617-725-6000 Daytime Phone #

CR2E034 (9/99)

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Commercial Union Risk Management, Inc.

Officers and Directors (Continued)

ADD OFFICERS & DIRECTORS:

Director: Charles R. Fitzpatrick, One Beacon Street, Boston, MA 02108
Director: Richard S. Banas, One Beacon Street, Boston, MA 02108
Director: Robert C. Gowdy, One Beacon Street, Boston, MA 02108
Vice President: Michael J. Billings, One Beacon Street, Boston, MA 02108
Vice President: Charles Woodrich, 436 Walnut Street, Philadelphia, PA 19106
Asst. Secretary: Joan K. Geddes, One Beacon Street, Boston, MA 02108