

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Worthington
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 26 AM 10:36

SECRETARY
DIVISION OF
95 MAY 2

DOCUMENT # 839752 (3)

~~LONDON GUARANTEE & ACCIDENT COMPANY OF NEW YORK~~
BUSINESS INSURANCE COMPANY

Principal Place of Business

Mailing Address

25 INDEPENDENCE BLVD.
WARREN NJ 07059

25 INDEPENDENCE BLVD.
WARREN NJ 07059

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

12/31/1977

05/01/1994

4. FEI Number

Applied For

13-2653231

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 3400 Data Drive

26 3400 Data Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Rancho Cordova, CA

28 Rancho Cordova, CA

24 95670

25 USA

29 95670

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

INSURANCE COMMISSIONER
CAPITOL BUILDING
TALLAHASSEE FL 32304

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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 hereby 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 agent and title if applicable)

(NOTE: Registered Agent signature required when registered)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP
NAME	BARRICK, ROBERT C.
STREET ADDRESS	25 INDEPENDENCE BLVD.
CITY ST ZIP	WARREN NJ
TITLE	D
NAME	HOOPER, NICHOLAS D
STREET ADDRESS	ONE BARTHOLOMEW LANE
CITY ST ZIP	LONDON, UK
TITLE	DVT
NAME	BOULANGER, ROBERT N.
STREET ADDRESS	25 INDEPENDENCE BLVD.
CITY ST ZIP	WARREN NJ
TITLE	D
NAME	DRYSDALE, KENNETH G.T.
STREET ADDRESS	331 BRIARPATCH
CITY ST ZIP	MOUNTAINSIDE NJ
TITLE	VPS
NAME	EMERY, JOYCE A.
STREET ADDRESS	25 INDEPENDENCE BLVD.
CITY ST ZIP	WARREN NJ
TITLE	D
NAME	FITZPATRICK, JAMES A. JR
STREET ADDRESS	1301 AVE OF THE AMERICAS
CITY ST ZIP	NEW YORK NY

1.1 TITLE	D/P	☒ Change ☐ Addition
1.2 NAME	Maurice A. Costa	
1.3 STREET ADDRESS	3400 Data Drive	
1.4 CITY ST ZIP	Rancho Cordova, CA 95670	
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME	Jeffrey L. Elder	
2.3 STREET ADDRESS	3400 Data Drive	
2.4 CITY ST ZIP	Rancho Cordova, CA 95670	
3.1 TITLE	D	☒ Change ☐ Addition
3.2 NAME	Steven D. Tough	
3.3 STREET ADDRESS	3400 Data Drive	
3.4 CITY ST ZIP	Rancho Cordova, CA 95670	
4.1 TITLE	S	☒ Change ☐ Addition
4.2 NAME	Allen J. Marabito	
4.3 STREET ADDRESS	3400 Data Drive	
4.4 CITY ST ZIP	Rancho Cordova, CA 95670	
5.1 TITLE	V/T	☒ Change ☐ Addition
5.2 NAME	Daniela Calvitti	
5.3 STREET ADDRESS	3400 Data Drive	
5.4 CITY ST ZIP	Rancho Cordova, CA 95670	
6.1 TITLE	V	☒ Change ☐ Addition
6.2 NAME	Robert White	
6.3 STREET ADDRESS	3400 Data Drive	
6.4 CITY ST ZIP	Rancho Cordova, CA 95670	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Allen J. Marabito, Secretary

5/19/95

916/631-5000