

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

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PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 853328 (3)

1. Corporation Name
THE TRAVELERS INDEMNITY COMPANY OF MISSOURI



Principal Place of Business P O BOX 1771 4600 FULLER DR., IRVING, TX 75038 DALLAS TX 75221-1771	Mailing Address P O BOX 1771 4600 FULLER DR., IRVING, TX 75038 DALLAS TX 75221-1771
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3. Date Incorporated or Qualified 06/30/1982	3a. Date of Last Report 05/01/1995
4. FEI Number 95-3634110	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 9200 Watson Road Suite, Apt. #, etc.	2a. Mailing Address 26 One Tower Square Suite, Apt. #, etc.
22 City & State 23 St. Louis, MO	27 City & State 28 Hartford, CT
24 Zip 63126	25 Country US
29 Zip 06183	30 Country US

9. Name and Address of Current Registered Agent

**STATE INSURANCE COMMISSIONER
 CAPITOL BUILDING
 TALLAHASSEE FL 8**

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

FL

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

TITLE	PCEO <input checked="" type="checkbox"/> DELETE
NAME	WATSON, CHRISTOPHER ER
STREET ADDRESS	388 GREENWICH STREET 21ST FLOOR
CITY-ST-ZIP	NEW YORK NY 10013-2396
TITLE	VCFO <input checked="" type="checkbox"/> DELETE
NAME	ZIEGLER, KENT W.
STREET ADDRESS	388 GREENWICH STREET, 21ST FLOOR
CITY-ST-ZIP	NEW YORK NY 10013-2396
TITLE	VD <input checked="" type="checkbox"/> DELETE
NAME	AYERS, O. L.
STREET ADDRESS	4600 FULLER DRIVE
CITY-ST-ZIP	IRVING TX
TITLE	SVD <input type="checkbox"/> DELETE
NAME	DECARLO, DONALD T.
STREET ADDRESS	200 PARK AVENUE
CITY-ST-ZIP	NEW YORK NY
TITLE	VD <input type="checkbox"/> DELETE
NAME	WEILL, MARC P.
STREET ADDRESS	65 E. 55TH STREET
CITY-ST-ZIP	NEW YORK NY
TITLE	AT <input checked="" type="checkbox"/> DELETE
NAME	ZACHARY, WAYNE REED JR
STREET ADDRESS	4600 FULLER DR
CITY-ST-ZIP	IRVING TX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
4 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	S/V/D/O
43 STREET ADDRESS	DeCarlo, Donald T
44 CITY-ST-ZIP	200 Manor Road
	Douglaston, NY 11363
5 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	V/D/O
53 STREET ADDRESS	Weill, Marc P
54 CITY-ST-ZIP	170 East 87th Street, Apt. West 11C
	New York, NY 10128
6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 119.07(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: _____ DATE: **4/15/1996** (860) 277-3743

Date Daytime Phone #

CR2E034 (12/95)

ATTACHMENT TO FLORIDA DEPARTMENT OF STATE
CORPORATION ANNUAL REPORT
THE TRAVELERS INDEMNITY COMPANY OF MISSOURI

OFFICERS/ DIRECTORS

D/C/O

Lipp, Robert I.
38 Park Road
Scarsdale, NY 10583

V

Anderson, James T.
411 Overlook Road
Glastonbury, CT 06033

V

Barbieri, Richard C.
124 Brookview Drive
Wethersfield, CT 06066

V

Calvano, James F.
54 Mohawk Avenue
Norwood, NJ 07648

D

Carpenter, Michael A.
134 Otter Rock Drive
Greenwich, CT 06830

P

Clarke, Charles J.
57 Sulky Lane
Glastonbury, CT 06033

D

Ettinger, Irwin R.
180 Dogwood Lane
Stamford, CT 06903

ATTACHMENT TO FLORIDA DEPARTMENT OF STATE
CORPORATION ANNUAL REPORT
THE TRAVELERS INDEMNITY COMPANY OF MISSOURI

OFFICERS/ DIRECTORS (CONTINUED)

D/O/C

Fishman, Jay S.
82 Owatonna Street
Haworth, NJ 07641

V

Foley, Ronald E., Jr.
125 Stoner Drive
West Hartford, CT 06107

S

Foran, Terrence J.
95 Ladyslipper Lane
Glastonbury, CT 06033

V

Green, Robert B.
14 North Drive
Simsbury, CT 06070

V

Hammond, Dale S.
152 Windshire
South Windsor, CT 06074

V

Higgins, Peter N.
114 Squire Glenn
Madison, CT 06443

V

Mannes, Barry L.
29 Stags Leap Court
Pikesville, MD 21208-1029

V

Morrison, Richard F.
10 Whispering Way
Warren, NJ 07059

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CORPORATION ANNUAL REPORT
THE TRAVELERS INDEMNITY COMPANY OF MISSOURI

OFFICERS/ DIRECTORS (CONTINUED)

V

Nothem, James A.
110 School Street
Coventry, CT 06238

V

Palczynski, Richard W.
31 Lee Lane
Tolland, CT 06084

V

Patterson, James A.
15 Highland St., #109
West Hartford, CT 06119

D

Prince, Charles O., III
100 Valley Forge Road
Weston, CT 06883

V

Shea, Thompson
97 Holmes Road
Ridgefield, CT 06877

V

Tyson, David A.
53 Country Club Lane
East Granby, CT 06026

V

Voss, F. Denney
1 Grace Church Street
Rye, NY 10580

T

White, William H.
8 Woodchuck Hill Road
Canton, CT 06019

ATTACHMENT TO FLORIDA DEPARTMENT OF STATE
CORPORATION ANNUAL REPORT
THE TRAVELERS INDEMNITY COMPANY OF MISSOURI

OFFICERS/ DIRECTORS (CONTINUED)

V

Willett, W. Douglas
180 Langford Lane
East Hartford, CT 06118

V

Wright, Ronald O.
725 Chestnut Hill Road
Glastonbury, CT 06033