

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 856609

(3)

1. Corporation Name:  
PHOENIX FOUNDERS, INC.



Principal Place of Business

Mailing Address

38 PROSPECT ST  
HARTFORD CT 06115  
US

38 PROSPECT ST  
HARTFORD CT 06103-2814  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/01/1983

3a. Date of Last Report

03/04/1996

4. FEI Number

06-0860167

Applied For

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

10. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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 pre-typed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	SCOTT, NOBLE C.	
STREET ADDRESS	291 PROSPECT ST	
CITY- ST- ZIP	WAST LONGMEADOW MA	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	RUBIN, BARBARA	
STREET ADDRESS	18 WILLOW GREEN WAY	
CITY- ST- ZIP	GLASTONBURY CT	
TITLE	ASVP	<input type="checkbox"/> DELETE
NAME	FLEMING, II., LAURENCE P	
STREET ADDRESS	39 CART ROAD	
CITY- ST- ZIP	GLASTONBURY CT	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	CARTER, JAMES S.	
STREET ADDRESS	1081-1/2 FARMINGTON AVE	
CITY- ST- ZIP	WEST HARTFORD CT	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BLOMQUIST, STEVEN R.	
STREET ADDRESS	24 ALICE LANE	
CITY- ST- ZIP	HERBRON CT	
TITLE	VPAT	<input type="checkbox"/> DELETE
NAME	DENYER, DOUGLAS G.	
STREET ADDRESS	129 COUNTRY VIEW DRIVE	
CITY- ST- ZIP	S. WINDSOR CT	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do 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 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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* *[Signature]* *[Signature]* 2/15/97 (866) 403-7132

CR2E034 (9/96)