2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 857508 1. Entity Name					Jan 31, 2000 8:00 am Secretary of State			
ORION C	CAPITAL COMPANIES, INC.				01-31-2000 90014			
Principal Place of Business		Mailing Address						
9 FARM SPRINGS RD FARMINGTON CT 06032		9 FARM SPRINGS RD FARMINGTON CT 06032-2526			00013	1199		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN	THIS SPACE		
City & State		City & State			4. FEI Number 06-1073574	ļ	pplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Add		
	6. Name and Address of Current	Registered Agent		<u>=</u> L	7. Name and Address of New Regist			
			Name		<u> </u>			
	ORPORATION SYSTEM S. PINE ISLAND ROAD	Street Address City		ddress (P.	O. Box Number is Not Acceptable)			
PLAN	ITATION FL 33324					E	 le	
			Oity			FL Zip Cod		
Tax filing t	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW!!! After MAY 1, 2000 Make Check Payable		550.00	Election Campaign Financin Trust Fund Contribution.		O May Be d to Fees	
11.	OFFICERS AND		12.		ADDITIONS/CHANGES TO OFFICERS			
NAME STREET ADDRESS CITY-ST-ZIP	PCEO BECKER, W M 9 FARM SPRINGS DRIVE FARMINGTON, CT 00000	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9300	rt V. Mendelsohn Arrowpoint Boulevard lotte, NC 28201	X Change	☐ Addition	
TITLE NAME	SVP JACOBSEN, RAYMOND W	☐ Delete	TITLE NAME STREET ADDRESS	SVP Paul	H. Stewman Arrowpoint Boulevard	XX Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	600 FIFTH AVENUE NEW YORK NY		CITY-ST-ZIP		lotte, NC 28201	ı		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSCO SCHUYLER, RAYMOND J. 600 FIFTH AVENUE NEW YORK NY	₹ X Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9300	o y Broderick Arrowpoint Boulevard lotte, NC 28201	X☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VINCI, PETER M. 9 FARM SPRINGS DR. FARMINGTON CT	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9 Fa	rm Springs Road	X Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SPITZER, JUDY S 9 FARM SPRINGS DR FARMINGTON CT	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9 Fa	rm Springs Road	X Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WEBB, JAMES W. 9 FARM SPRINGS DRIVE FARMINGTON CT	□XI Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	9 Fa	d B. Semeraro rm Springs Road ington, CT 06032	XX Change	☐ Addition	
indicated of the cor	certify that the information supplied with	true and accurate and that my owered to execute this report as	signature shall h	nave the sa	tion 119.07(3)(i), Florida Statutes. I furth ame legal effect as if made under oath, I Florida Statutes; and that my name app	that I am an officer	r or director	

SIGNATURE: SIGNATURE AND TYPED JUNE OF SIGNING OFFICER OF DIRECTOR Date OF SIGNING PRINTED NAME OF SIGNING OFFICER OF DIRECTOR DATE OF SIGNING PRINTED NAME OF SIGNING PRINTED