


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90039 016 ***150.00

DOCUMENT # F010Q0004698	
1. Entity Name PITNEY BOWES INSURANCE AGENCY, INC.	

Principal Place of Business 27 WATERVIEW DRIVE SHELTON, CT 06484	Mailing Address 27 WATERVIEW DRIVE SHELTON, CT 06484
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address ONE ELMCROFT RD
Suite, Apt. #, etc.	Suite, Apt. #, etc. MSC 6101
City & State	City & State STAMFORD, CT
Zip	Country USA
Country	Zip 06926-0700



03142007 Chg-P CR2E034 (12/06)

4. FEI Number 06-1401934	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

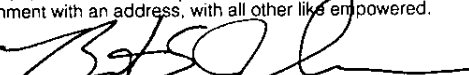
**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUGHES, CHRISTIAN D 27 WATERVIEW DRIVE SHELTON, CT <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RICHARD MARTORANA ONE ELMCROFT RD STAMFORD, CT 06926 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WALCOTT, JOHN 27 WATERVIEW DR. SHELTON, CT 06484 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BARRET S. JOHNSON ONE ELMCROFT RD STAMFORD, CT 06926 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS SEIDEMAN, MICHELLE C 27 WATERVIEW DRIVE SHELTON, CT <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HELEN, SHAN 1 ELMCROFT RD STAMFORD, CT 06926 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SULLIVAN, THOMAS 27 WATERVIEW DRIVE SHELTON, CT <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S AMY C. CORN ONE ELMCROFT RD STAMFORD, CT 06926 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WAYNE, STEPHEN D 27 WATERVIEW DRIVE SHELTON, CT <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRET S. JOHNSON
VICE - PRESIDENT

Date

(203) 351-7652
Daytime Phone #

ATTACHMENT

60033161

F01000004698

PITNEY BOWES INSURANCE AGENCY, INC.
OFFICERS AND DIRECTORS

<u>NAME</u>	<u>TITLE</u>	
Richard Martorana	President and Controller	
Michelle C. Seideman	Vice President and Assistant Secretary	c/o Pitney Bowes Inc., 1 Elmcroft Road, Stamford, CT 06926-0700
Helen Shan	Vice President & Treasurer	c/o Pitney Bowes Inc., 1 Elmcroft Road, Stamford, CT 06926-0700
Barret S. Johnson	Vice President	c/o Pitney Bowes Inc., 1 Elmcroft Road, Stamford, CT 06926-0700
Amy C. Corn	Secretary	c/o Pitney Bowes Inc., 1 Elmcroft Road, Stamford, CT 06926-0700
Stephen D. Wayne	Assistant Secretary	c/o Pitney Bowes Inc., 1 Elmcroft Road, Stamford, CT 06926-0700
Patricia M. Johnson	Assistant Secretary	c/o Pitney Bowes Inc., 1 Elmcroft Road, Stamford, CT 06926-0700

DIRECTORS

Bruce P. Nolop
David Kleinman
Helen Shan

Business Address:

Pitney Bowes Insurance Agency, Inc.
c/o Pitney Bowes Global Financial Services LLC
27 Waterview Drive
Shelton, CT 06484-8000

1/22/07