

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000000119

1. Entity Name
JERSEY MIAMI CORP.



Principal Place of Business
FOUR STAMFORD PLAZA, 107 ELM ST.
STAMFORD, CT 06902

Mailing Address
FOUR STAMFORD PLAZA, 107 ELM ST.
STAMFORD, CT 06902



02232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
81-0586441

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000086354
03/12/04-80020-018 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
KRAMER, JOHN P
FOUR STAMFORD PLAZA, 107 ELM ST.
STAMFORD, CT 06902

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
LEE, CLARENCE V III
FOUR STAMFORD PLAZA, 107 ELM ST.
STAMFORD, CT 06902

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
SHEA, RICHARD J JR.
100 PEARL ST., 12TH FLOOR
HARTFORD, CT 06103

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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12. I 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 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: Clarence V. Lee III 2/23/04 (203) 328-2300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
EVP/CEO Date Daytime Phone #