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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

#### F92000000252 (8) DOCUMENT #

THE TRAVCO INSURANCE COMPANY

FISHMAN, JAY S.

HARTFOED CT

**ONE TOWER SQUARE** 

NAME

STREET ADDRESS

				,	
Principal Place of Business Mailing Address					
6081 EAST 8		ONE TOWER SOUARE			
INDIANAPOLIS ID 46250 HARTFORD CT 06183-601			014		DO NOT WRITE IN THIS SPACE
US					3. Date Incorporated or Qualified
					11/03/1992
2 Principal F	Place of Business	2a. Mailing Address			4. FEI Number Applied Fo
21	Table of Eddinoss	26			35-1838077 Not Applied
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$0.7E
22	. n, 6to.	27			5. Certificate of Status Desired Fee Required
City & Star	le	City & State			8. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry	This corporation owes or has paid the current year Intangible
24	25	29	30	•	Personal Property Tax due June 30. Yes X No
	9. Name and Address of Curre		1		10. Name and Address of New Registered Agent
T)-	IE INSURANCE COMMISSIONER			B1 Name	
	E CAPITOL			82 Street	Address (D.O. Day Marshay in Nat Assessable)
	LLLAHASSEE FL 32399-0300			Street /	Address (P.O. Box Number is Not Acceptable)
"	CEMINOCE IE 02000 COO		1	83	
				<b>84</b> City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607 050	12 and 607 1508. Florida Stati	ites the at	ove-named	corporation submits this statement for the purpose of changing its register
office or	registered agent, or both, in the State	of Florida. Such change was	authorized	by the corp	oration's board of directors. I hereby accept the appointment as register
¦ agentita I	am tamiliar with, and accept the oblig	ations of, Section 607 0505, F	iorida Stat	лes.	
SIGNATURE	Signature, typed or printed name of registered ag-	and some table of exceptionable.	TE Doolstores	Accel a goal us	required when reinstating) DATE
12.		D DIRECTORS	13.	i Ageni alginatore	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DCPO	DELETE	1.1 701	LE	D/C Change X Ad
NAME	UPP, ROBERT I.		1.2 NA	ME	ĽÓŇG, STANTON, F.
STREET ADDRESS	ONE TOWER SQUARE			REET ADDRESS	ONE TOWER SQUARE
CITY-ST-ZIP	HARTFORD CT			Y-ST-ZIP	HARTFORD CT 06183
TITLE	DVO	DELETE	2.1 Til		D/V Change 🕅 Adv
NAME	HANNON, WILLIAM P.		2.2 NA	1	CLARKE, CHARLES J.
STREET ADDRESS	ONE TOWER SQUARE			REET ADDRESS	ONE TOWER SQUARE
· -	AARTFORD CT				HARTFORD CT 06183
CITY-ST-ZIP TITLE	TOTAL OIL	DELETE	2. 4 U	TY-ST-ZIP	D/V Change X Adi
	WHITE, WILLIAM H	[] DECETE	•		KIERNAN, JOSEPH P.
NAME ATORET LIBORISO	ONE TOWER SQUARE		3.2 NA	Į.	ONE TOWER SQUARE
STREET ADDRESS	HARTFORD CT			REET ADDRESS	HARTFORD CT 06183
CITY-ST-ZIP	THE TOTAL CI	DELETE		TY-ST-ZIP	
TITLE	I AMELEY CLENING	☐ DETER	4.1 111	i	
NAME	LAMMEY, GLENN D		4. 2 N		MICHENER, JAMES M.
STREET ADDRESS	ONE TOWER SQUARE			REET ADDRESS	ONE TOWER SQUARE
CITY-ST-ZIP	HARTFORD CT			Y - S1 - ZIP	HARTFORD CT 06183
TITLE	DV	☐ DELET <b>e</b>	5.1 TIT		D/V Change Add
NAME	FOLEY, RONALD E JR		5.2 NA	ME	RESTREPO, ROBERT P., JR.
STREET ADDRESS	ONE TOWER SQUARE		5.3 ST	REET ADDRESS	ONE TOWER SQUARE
CITY+ST-ZIP	HARTFORD CT		5.4 CI	Y-S1-ZIP	HARTFORD CT 06183
TITLE	DCO	DELETE	6.1 TIT	ı c	Change X Ad-

14. Thereby certify that the information supplied with this filling 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 if changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

MADONNA, JON C.

388 GREENWICH STREET

NEW YORK NY 10013

**FILED** 

Apr 20 1998 8:00am

Secretary of State

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## ATTACHMENT TO FLORIDA 1998 PROFIT CORPORATION ANNUAL REPORT TRAVCO INSURANCE COMPANY

### 13. ADDITIONS TO OFFICERS AND DIRECTORS IN 12:

V CERONE, JAMES F. ONE TOWER SQUARE HARTFORD CT 06183

V GIBBS, J. DAVID ONE TOWER SQUARE HARTFORD CT 06183

V HEALY, PAUL A. ONE TOWER SQUARE HARTFORD CT 06183

V HIGGINS, PETER N. ONE TOWER SQUARE HARTFORD CT 06183

AS JACKSON, DANIEL W. ONE TOWER SQUARE HARTFORD CT 06183

V MEAD, CHRISTINE B. ONE TOWER SQUARE HARTFORD CT 06183

V MORRIS, C. TIMOTHY ONE TOWER SQUARE HARTFORD CT 06183

V MORRISON, RICHARD F. ONE TOWER SQUARE HARTFORD CT 06183

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### **13. ADDITIONS TO OFFICERS AND DIRECTORS IN 12:**

V PALCZYNSKI, RICHARD W. ONE TOWER SQUARE HARTFORD CT 06183

D ROBERTSON, MICHAEL A. 6081 EAST 82<sup>ND</sup> STREET INDIANAPOLIS IN 46250

V TYSON, DAVID A. ONE TOWER SQUARE HARTFORD CT 06183

V VOSS, F. DENNEY 388 GREENWICH STREET NEW YORK NY 10013

V WILLET, W. DOUGLAS ONE TOWER SQUARE HARTFORD CT 06183

V YESSMAN, TIMOTHY M. ONE TOWER SQUARE HARTFORD CT 06183