

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

FILED
May 02 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 # F95000002889 (2)
1. Corporation Name
THE TRAVELERS INSURANCE GROUP INC.

Principal Place of Business ONE TOWER SQUARE HARTFORD CT 06183-8014	Mailing Address ONE TOWER SQUARE HARTFORD CT 06183-0001
---	---

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

3. Date Incorporated or Qualified 06/15/1995	3a. Date of Last Report 04/21/1996
4. FEI Number 06-1008174	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	

9. Name and Address of Current Registered Agent
**INSURANCE COMMISSIONER
CAPITOL
TALLAHASSEE FL 32399-0300**

10. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	COPD
NAME	LIPP, ROBERT I
STREET ADDRESS	ONE TOWER SQUARE
CITY-ST-ZIP	HARTFORD CT 06183
TITLE	ODC
NAME	FISHMAN, JAY S
STREET ADDRESS	ONE TOWER SQUARE
CITY-ST-ZIP	HARTFORD CT 06183
TITLE	S
NAME	FORAN, TERRENCE J
STREET ADDRESS	ONE TOWER SQUARE
CITY-ST-ZIP	HARTFORD CT 06183
TITLE	OSDV
NAME	DECARLO, DONALD T
STREET ADDRESS	ONE TOWER SQUARE
CITY-ST-ZIP	HARTFORD CT 06183
TITLE	DV
NAME	ETTINGER, IRWIN R
STREET ADDRESS	388 GREENWICH STREET
CITY-ST-ZIP	NEW YORK NY 10013
TITLE	V
NAME	HELFRICH, THOMAS E
STREET ADDRESS	ONE TOWER SQUARE
CITY-ST-ZIP	HARTFORD CT 06183

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☒ Addition
32 NAME	S
33 STREET ADDRESS	Eddy, Paul H.
34 CITY-ST-ZIP	One Tower Square Hartford CT 06183
41 TITLE	☐ Change ☒ Addition
42 NAME	V/T
43 STREET ADDRESS	White, William H.
44 CITY-ST-ZIP	One Tower Square Hartford CT 06183
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☒ Addition
62 NAME	V
63 STREET ADDRESS	Morrison, Richard E.
64 CITY-ST-ZIP	One Tower Square Hartford CT 06183

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 if changed, or on an attachment with an address **Daniel W. Jackson**

SIGNATURE _____ DATE **4/24/1997** 860-277-4012

CR2E034 (9/96)

**ATTACHMENT TO FLORIDA PROFIT CORPORATION ANNUAL REPORT
THE TRAVELERS INSURANCE GROUP, INC.**

13. ADDITIONS TO OFFICERS AND DIRECTORS IN 12:

D

**CARPENTER, MICHAEL A.
ONE TOWER SQUARE
HARTFORD CT 06183**

V/O

**EHRlich, SELIG
ONE TOWER SQUARE
HARTFORD CT 06183**

AS

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

V

**MANNES, BARRY L.
ONE TOWER SQUARE
HARTFORD CT 06183**

V

**SHEA, THOMPSON
ONE TOWER SQUARE
HARTFORD CT 06183**

V

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

V

**VOSS, F. DENNEY
388 GREENWICH ST
NEW YORK NY 10013**

D/V/O

**WEILL, MARC P.
ONE TOWER SQUARE
HARTFORD CT 06183**

V

**WILLETT, W. DOUGLAS
ONE TOWER SQUARE
HARTFORD CT 06183**