

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 30, 2001 8:00 am**  
**Secretary of State**

05-30-2001 90036 021 \*\*\*550.00

**DOCUMENT # F95000005863**

1. Entity Name

**KEYCORP INSURANCE AGENCY INC.**

Principal Place of Business

127 PUBLIC SQ., 4TH FLOOR  
 MAILCODE OH-01-27-0809  
 CLEVELAND OH 44114  
 US

Mailing Address

127 PUBLIC SQ., 4TH FLOOR  
 MAILCODE OH-01-27-0809  
 CLEVELAND OH 44114  
 US

2. Principal Place of Business

3. Mailing Address

127 Public Square, 8th Floor

Suite, Apt. #, etc.

Suite, Apt. #, etc.

MAILCODE: OH-C1-27-0826

City & State

City & State

Cleveland, OH

Zip

Country

Zip

44114-1306

Country

4. FEI Number

14-1745243

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

Name

**Corporation Service Company**

Street Address (P.O. Box Number is Not Acceptable)

**1201 Hays Street**

City

**Tallahassee,**

**FL**

Zip Code  
**32301**

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.

**Changed Filed with State on April 24, 2001 with signature of CSC**

SIGNATURE

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

(NOT: Registered Agent's signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW !! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **AS** ☐ Delete  
 NAME **BULLOCH, STEVEN N**  
 STREET ADDRESS **127 PUBLIC SQUARE**  
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ Delete  
 NAME **KOPINSKI, JACK L.**  
 STREET ADDRESS **127 PUBLIC SQUARE**  
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ Delete  
 NAME **KOPULSKY, JACK L**  
 STREET ADDRESS **127 PUBLIC SQUARE**  
 CITY-ST-ZIP **CLEVELAND OH**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ Delete  
 NAME **HEISLER, ROBERT B JR**  
 STREET ADDRESS **127 PUBLIC SQUARE**  
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ Delete  
 NAME **BENNETT, JAMES E**  
 STREET ADDRESS **127 PUBLIC SQUARE**  
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ Delete  
 NAME **HEISLER, ROBERT B. JR**  
 STREET ADDRESS **127 PUBLIC SQUARE**  
 CITY-ST-ZIP **CLEVELAND OH 44114**

TITLE ☐ Change ☐ Addition  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS ☐ Change ☐ Addition  
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

*Richard G. Zeiger*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Richard G. Zeiger, Secretary**

05-24-01 216/689-4126

Date

Daytime Phone #

CR2E034 (10/00)

Attachment Doc # F95000005863  
C0070630

**KEYCORP INSURANCE AGENCY, INC.**

**DIRECTORS**

Full Legal Name: **Jack L. Kopnisky**  
Business Addr: 127 Public Square  
Cleveland, OH 44114

Full Legal Name: **Robert Bauman Heisler, Jr.**  
Business Addr: 127 Public Square  
Cleveland, Ohio 44114

Full Legal Name: **Woodrow Hughes**  
Business Addr: 800 Superior Avenue  
Cleveland, OH 44115

Attachment Doc. # F95066005863

C0070630

**KEYCORP INSURANCE AGENCY, INC.**

**OFFICERS**

Full Name: **Woodrow Hughes - President**  
Business Addr: 800 Superior Avenue  
Cleveland, Ohio 44115

Full Name: **Lisa Gillinov - Vice President**  
Business Addr: 127 Public Square  
Cleveland, Ohio 44114-1306

Full Name: **Armando Leo - Vice President**  
Business Addr: 745 Atlantic Avenue  
Boston, Massachusetts 02111

Full Name: **Joanne Mule Di-Paolo - Vice President**  
Business Addr: 154 Quaker Road  
Queensbury, New York 12804

Full Name: **Michael Sharpe - Vice President**  
Business Addr: 800 Superior Avenue  
Cleveland, Ohio 44115

Full Legal Name: **Kristin Hirsch - Vice President**  
Business Addr: 800 Superior Avenue  
Cleveland, OH 44115

Full Name: **Richard G. Zeiger - Secretary**  
Business Addr: 127 Public Square  
Cleveland, Ohio 44115

Full Name: **Jerry McCalmont - Chief Financial Officer  
and Treasurer**  
Business Addr: 127 Public Square  
Cleveland, Ohio 44114-1306

Attachment Doc# F950000058103  
C0070630

Full Name: **Steven N. Bulloch - Assistant Secretary**  
Business Addr: 127 Public Square  
Cleveland, Ohio 44114-1306

Full Name: **Vincent J. Battaglia - Assistant Vice President**  
Business Addr: 100 Corporate Woods  
Rochester, New York 14623

Full Name: **Salvatore A. Messina - Assistant Vice President**  
Business Addr: 100 Corporate Woods  
Rochester, New York 14623

Full Name: **Karen Worth - Assistant Vice President**  
Business Addr: 221 South Warren Street  
Syracuse, New York 13202

Full Name: **Joni R. Vann - Officer**  
Business Addr: 702 W. Idaho  
Boise, Idaho 83702

Full Legal Name: **Carol V. Moore - Licensing Officer**  
Business Addr: 127 Public Square  
Cleveland, OH 44114