

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

FILED

Jan 29 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000005877 (3)

1. Corporation Name

SECURE AFFINITY AGENCY, INC.

Principal Place of Business

ONE TOWER SQUARE, 19CP  
HARTFORD CT 06183

Mailing Address

ONE TOWER SQUARE, 19CP  
HARTFORD CT 06183

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/08/1996

4. FEI Number

62-1657094

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE

NAME HAYMAN, JEFFREY L  
STREET ADDRESS ONE TOWER SQUARE  
CITY - ST - ZIP HARTFORD CT 06183

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME Phillip Kenyon  
1.3 STREET ADDRESS 2200 Sutherland Avenue Suite B200  
1.4 CITY - ST - ZIP Knoxville, TN

TITLE V ☐ DELETE

NAME KENYON, PHILLIP  
STREET ADDRESS 2200 SUTHERLAND AVENUE - SUITE B200  
CITY - ST - ZIP KNOXVILLE CT 06183

2.1 TITLE V ☒ Change ☐ Addition

2.2 NAME Bruce Letizia  
2.3 STREET ADDRESS One Tower Square  
2.4 CITY - ST - ZIP Hartford, CT 06183

TITLE V ☐ DELETE

NAME LETIZIA, BRUCE  
STREET ADDRESS ONE TOWER SQUARE  
CITY - ST - ZIP HARTFORD CT 06183

3.1 TITLE V ☒ Change ☐ Addition

3.2 NAME George A. Ryan  
3.3 STREET ADDRESS One Tower Square  
3.4 CITY - ST - ZIP Hartford, CT 06183

TITLE V ☐ DELETE

NAME RYAN, GEORGE A  
STREET ADDRESS ONE TOWER SQUARE  
CITY - ST - ZIP HARTFORD CT 06183

4.1 TITLE S ☐ Change ☐ Addition

4.2 NAME Paul H. Eddy  
4.3 STREET ADDRESS One Tower Square  
4.4 CITY - ST - ZIP Hartford, CT 06183

TITLE AS ☐ DELETE

NAME KENDALL, JOHN W  
STREET ADDRESS ONE TOWER SQUARE  
CITY - ST - ZIP HARTFORD CT

5.1 TITLE AS ☒ Change ☐ Addition

5.2 NAME Dana Billings  
5.3 STREET ADDRESS One Tower Square  
5.4 CITY - ST - ZIP Hartford, CT 06183

TITLE S ☐ DELETE

NAME EDDY, PAUL H  
STREET ADDRESS ONE TOWER SQUARE  
CITY - ST - ZIP HARTFORD CT 06183

6.1 TITLE T ☐ Change ☒ Addition

6.2 NAME Lynn Fisher  
6.3 STREET ADDRESS One Tower Square  
6.4 CITY - ST - ZIP Hartford, CT 06183

14. 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 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.

SIGNATURE:

Lynn M. Fisher

1/16/98 860 954-1277

CR2E034 (10/97)