## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Aug 14, 2000 08:00 AM DOCUMENT # F9900006658 1. Entity Name **Secretary of State** JERSEY FLORIDA CORP. Principal Place of Business Mailing Address TWO STAMFORD PLAZA TWO STAMFORD PLAZA 281 TRESSER BOULEVARD - 8TH FLOOR 281 TRESSER BOULEVARD - 8TH FLOOR STAMFORD CTCT 06901 06901 2. Principal Place of Business 3. Mailing Address FOUR STAMFORD PLAZA, 15TH FLOOR FOUR STAMFORD PLAZA, 15TH FLOOR Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 107 ELM STREET 107 ELM STREET City & State City & State 4. FEI Number Applied For STAMFORD СТ STAMFORD CT06-1566234 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 06902 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION 33324 Zip Code 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. 08/14/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Change ☐ Addition SHEA RICHARD NAME STREET ADDRESS 100 PEARL STREET, 12TH FLOOR STREET ADDRESS CITY-ST-ZIP HARTFORD CT 06103 CITY-ST-ZIP TITLE ☐ Delete TITLE X Change ☐ Addition NAME CLARENCE VIII LEE NAME LEE CLARENCE VIII STREET ADDRESS 281 TRESSER BLVD., 8TH FLOOR STREET ACCRESS FOUR STAMFORD PLAZA, 15TH FL., 107 ELM ST. CITY-ST-ZIF STAMFORD CT 06901 CITY-ST-718 STAMFORD 06901 TITLE ☐ Delete TILE PD X Change ☐ Addition NAME LUNDBERG LANCE NAME KRAMER STREET ADDRESS 281 TRESSER BLVD., 8TH FLOOR FOUR STAMFORD PLAZA, 15TH FL., 107 ELM ST. STREET ADDRESS CITY-ST-ZIP STAMFORD 06901 CITY-ST-ZIP STAMFORD ☐ Defete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Delete TITLE ☐ Addition NAME NAME

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.

STREET ADDRESS

CITY-ST-7/8

STREET ADDRESS

CITY-ST-7IP