2000	UNIFORM BUSI	NESS REPO	KI (L	JBK)	 ,	ì	I	101/	
DOCUMENT # K31776 1. Entity Name									
FLORIDA PETROLEUM LIABILITY INSURANCE PROGRAM AD						FILED			
						00 JUL -7	AH 10: 23		
Principal Plac	e of Business	Mailing Address			İ	1			
501 CARR RD WILMINGTON DE 19850 US		70 PINE ST ATTN: EM TUCK NEW YORK NY 10270-0002				SECRETARY TALLAHASSE	E. FÉORIDA	1 018 13 2 00 5	
2. Principal Place of Business 317 Riveredge Blvd		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN T	THIS SPACE			
Cocoa, FL		City & State		4. F	El Number 59-2919248		plied For t Applicable		
329	Country	Zip	Country		5. C	Certificate of Status Desired	\$8.75 Add Fee Require		
<u> </u>	6. Name and Address of Current R	egistered Agent			7. N	ame and Address of New Registe	red Agent		
			N	ame					
	PORATION SERVICE COMPANY HAYS STREET			Street Address (P.O. Box Number is Not Acceptable)					
TALL	AHASSEE FL 32301								
			C	ity 			FL Zip Code	·	
8. The above	named entity submits this statement for	the purpose of changing its	registered of	ffice or reg	istered age	ent, or both, in the State of Florida.			
SIGNATURE									
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered Age	nt signature re	quired when rei	nstating) D	ATE		
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, 2000 Fee will be \$550.0 Make Check Payable to Department of			10. Election Campaign Financing Trust Fund Contribution.		May Be to Fees		
11.	OFFICERS AND D	DIRECTORS	12.		ADI	DITIONS/CHANGES TO OFFICERS	AND DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORNELL, KENNETH B 70 PINE ST NEW YORK NY 10270	☐ Delete	TITLE NAME STREET AD CITY-ST-2		·		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D Castelli, Michael J 175 Water Street	Delete	TITLE NAME STREET AD CITY-ST-2				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NEW YORK NY 10270 S TUCK, ELIZABETH M 70 PINE ST NEW YORK NY 10270	☐ Delete	TITLE NAME STREET AD CITY-ST-7	Į.			☐ Change	Addition	
TITLE NAME STREET ADDRESS	D CORNELL, KEN C/O A.I.G. 70 PINE STREET	Delete	TITLE NAME STREET AD	DDRESS		20000331	□ Change 7522-	Addition	
CITY-ST-ZIP	NEW YORK NE		CITY-ST-Z					To a sales	
TITLE NAME STREET ADDRESS		☐ Dølete	TITLE NAME STREET AD	DORESS S	ane os co	Gregory are Road Ogton, DE	☐ Change	Addition	
CITY-ST-ZIP			CITY-ST-2	ZIP L	<u>אומאינ</u>	ngton, DE			
TITLE		☐ Delete	TITLE	i	,	\mathcal{I}	Change	☐ Addition 1	

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-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

Date



ACCOUNT NO. : 072100000032

REFERENCE: 755506

4320171

AUTHORIZATION

COST LIMIT

\$ 550.00

ORDER DATE: July 6, 2000

ORDER TIME: 4:34 PM

ORDER NO. : 755506-185

CUSTOMER NO: 4320171

CUSTOMER: Ms. Bernadette Colon

American International Group,

70 Pine Street

27th Floor

New York, NY 10270

ANNUAL REPORT FILING

NAME:

FLORIDA PETROLEUM LIABILITY

INSURANCE PROGRAM ADMINISTRATORS, INC.

XX _ ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX __ PLAIN STAMPED COPY

EXAMINER'S INITIALS: