



# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 13, 2005 8:00 am**  
**Secretary of State**

07-13-2005 90019 025 \*\*\*150.00

<b>DOCUMENT # P04675</b> 1. Entity Name <b>SCOR REINSURANCE COMPANY</b>					
Principal Place of Business <b>199 WATER STREET 21ST FLOOR NEW YORK, NY 10038-3526</b>			Mailing Address <b>199 WATER STREET 21ST FLOOR NEW YORK, NY 10038-3526</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>75-1444207</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  <b>CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000</b>				<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b></span> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>GEOP KLECAN, KENRY JR. 199 WATER STREET NEW YORK, NY 100383526</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Henry Klecan, JR</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP FABER, ROBERT THOMAS 199 WATER STREET NEW YORK, NY 100383526</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DIRECTOR Patrick Thovrot 199 Water Street New York, NY 10038</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVPS VERNE, MAXINE HILARY 199 WATER STREET NEW YORK, NY 100383526</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVPC VERBICH, JOHN 19 WATER STREET NEW YORK, NY 100383526</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP + CFO Joseph Cook 199 Water Street New York, NY 10038</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP FITZPATRICK, JOHN PATRICK 199 WATER STREET NEW YORK, NY 100383526</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date _____ Daytime Phone # <b>212 480-1900</b>		

# ATTACHMENT

14018876  
# P04675

SCOR REINSURANCE CO

## Board of Directors

John Tennant Andrews, Jr.  
199 Water Street  
New York, NY 10038 - 3526

Allan Melville Chapin  
199 Water Street  
New York, NY 10038 - 3526

Denis Kessler, Chairman  
199 Water Street  
New York, NY 10038 - 3526

Edward Nathan Wolff  
199 Water Street  
New York, NY 10038 - 3526

Steven Zane Desner  
199 Water Street  
New York, NY 10038 - 3536

Daniel Lebegue  
199 Water Street  
New York, NY 10038 - 3536

## Officers

Henry Klecan, Jr.  
199 Water Street  
New York, NY 10038 - 3526

John Daniel Cook  
199 Water Street  
New York, NY 10038 - 3526