2000 Uniform Business Report (UBR) FILED May 08, 2000 8:00 am Secretary of State DOCUMENT # P05032 1. Entity Name Tower Square Securities, Inc. 05-08-2000 90204 046 ***150.00 Principal Place of Business Mailing Address %Corp Tax 5PB %Corp. Tax 5PB One Tower Square One Tower Square Hartford, CT 06183-1190 Hartford, CT 06183-1190 C0082355 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 06-0843577 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road Plantation, FL 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. SIGNATURE DATE 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 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees \Box Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. P Addition TITLE TITLE **□** Delete Kokulis, George C NAME NAME Zeitman Lea STREET ADDRESS STREET ADDRESS 6 Oxyoke Drive 12 Glenmore Drive Farmington, CT CITY-ST-ZIP CITY-ST-ZIP Simsbury CT ☐ Change ☐ Addition ☐ Delete TITLE Russo , Joanne K NAME NAME STREET ADDRESS STREET ADDRESS 229 School Street CITY-ST-ZIP CITY-ST-ZIP Manchester, CT ☐ Change ☐ Addition ☐ Delete TITLE TITLE ._ Munson,-Donald-R-Jr.---NAME NAME 60 Pheasant Way STREET ADDRESS STREET ADDRESS South Windsor, CT CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DCB √ Change Delete TITI F Johnson, Russell H. NAME STREET ADDRESS STREET ADDRESS 5 Benford Dr. CITY-ST-ZIP CITY-ST-ZIP Princeton, NJ TITLE ☐ Change ☐ Addition ☐ Delete Asteriades, William A. NAME NAME 30 Bluff Point Road STREET ADDRESS STREET ADDRESS South Glastonbury, CT CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □XDelete TITLE Wilcox, William D. Cynthia P. McDonald NAME NAME 268 KRidgewodd RRoad 29 Kingswood Road STREET ADDRESS STREET ADDRESS West Hartford, CT West Hartford, CT 06119 CITY-ST-ZIP CITY-ST-7IP 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 with all other like empowered. SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR