## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P06829 **DOCUMENT #** 

(6)

MONITOR LIFE INSURANCE COMPANY OF NEW YORK

Principal Place of Business COMMERCIAL TRAVELERS BUILDING Mailing Address

COMMERCIAL TRAVELERS BUILDING

pg lore



3.104 111	13002-0370	U110A NT 13302-697	U					
					3. Date Incorporated or Qualified 07/23/1985	3a. Date of La 03/22		
<b>⊢</b> '	Place of Business	2a. Maling Address			4. FEI Number	·	Applied For	
21		26	·		16-0986348		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27	Suite, Apl. #, etc.		5. Certificate of Status Desired		.75 Additional ee Required	
City & Stat	te	City & State			6. Election Campaign Financing	\$1	5.00 May Be	
23		28			Trust Fund Contribution	1 1 '	dded to Fees	
Zip	Country	Zφ	Cou	intry	8. This corporation has liability for in	itang ble tax unde	ers 199.032,	
24	25	29	30		Florida Statutes			
<del></del>	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent		
				81 Name	•			
	S, CURTIS			82 Street Address (P.O. Box Number is Not Acceptable)				
	2501 W.WILLSBORO BLVD.#105							
DEERF	IELD BCH. FL 33442		j	83				
				<b>84</b> City		Ei 85	Zip Code	
11. Pursuant	to the provisions of Sections 607 0509	and 607.1508. Florida Statut	es the etc	vo.named.corcos	ation submits this statement for the purp		the consists of the	
familiar w	red agent, or both, in the State of Florid rth, and accept the obligations of, Section			corporation's boar	arcon submits this statement for the purp rd of directors. I hereby accept the appoi	ntriient as registe	its registered office ared agent. Fam	
SIGNATURE	Signature, typed or productinal recollegence diagnostic			Agent signal in he pare	,	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC			
TIFLE		☐ DELETE	1.11			☐ Chan	ige 🔲 Addition	
NAME	JOSLIN, DONALD E.		1 2 NA	ME				
STREET ADDRESS	KORBER ROAD		135	HEET ADDRESS				
CITY - ST - ZIP	HOLLAND PATENT NY	F1 N. FI		IY - SI - 7.P				
TITLE	C EALVENOTEDAL DONALD D	☐ DELETE	2 1 1			Chan	nge 🗌 Addition	
NAME	FALKENSTERN,DONALD D. 45 FOOTE RD.		2.2 NA	_				
STREET AUDRESS	CLINTON NY		23.81	REFT ADDRESS				
CITY-ST-ZIP TITEF	D	DELETE		IY-SI-ZiF				
	GILLES, STEPHEN A.	☐ DETERE	3 1 11			Chan	ige 🔲 Addition	
NAME PERSON NORTH AND PAGE	1 SHAW STREET		3.2 NA					
STREET ADDRESS	UTICA NY			HEFT ADDRESS				
CITY-ST-ZIP TITLE	TD	☐ DEVETE		'Y - S' - ZIP				
NAME	TREVVETT, JAMES D.	T] bevole	4 1 TI			☐ Chan	ige 🔲 Addition	
STREET ADDRESS	BOX 923 GRANT ROAD		4 2 N4					
CITY-ST-ZIP	COLD BROOK NY			REET ADDRESS				
TITLE	S S	☐ DELETE		Y - ST - ZIP		Flo	- 5 440	
NAME	MILNER, DAVID R.		5 1 11			Chan	ge 🗌 Addition	
STREET ADDRESS	66 WHITFORD AVE		5 2 NA	I				
CITY+ST-ZIP	WHITESBORO NY			REET ADORESS				
T:TLE	D	□ DELETE		Y-ST ZIP			- F3 4 100	
NAME	BOYLE, JOHN V.	□ vcc·r	6 1 11			☐ Chan	ge   Addition	
	202 GILBERT ROAD		6.2 NA					
STREET ADDRESS	NEW HARTFORD NY			REFLADDRESS				
CITY-SI-ZIF	MEM HARTLUKU NY		5401	Y ST-ZiP			İ	

I do hereby certify that the information supplied with trus filing is volur tarily furnished and closs not qualify for the exemption stated in Section 119.07(3)(k). 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 Brook 13 if changing or on an attaching the receiver of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
David R Milner, Secretary

April 1, 1996 (315) 797-5200



P06829

MONITOR LIFE INSURANCE COMPANY OF NEW YORK COMMERCIAL TRAVELERS MONITOR LIFE INSURANCE COMMERCIAL TRAVELERS BUILDING UTICA, NEW YORK 13502

STATE OF FLORIDA Department of State Division of Corporations

1996 CORPORATION ANNUAL REPORT

Company # P06829 MONITOR LIFE INSURANCE COMPANY OF NEW YORK

## BLOCK 12 - ADDENDUM

Names of Officers and Directors	<u>Title</u>	Street Address	City & State
Trevvett, Herbert E. Kelly, Kevin M. McCarthy, Jeremiah O. * Mitchell, Donald J ** Porn, John J Schafer, Arthur W Sheldon, Robert N. Stetson, John B. Vicks, Dwight E. Welch, Robert E. Spath, Thomas F.	Ch/D D D D D D D D D D	Millington Ave 2 Glen Street RR 1, Box 276 Shells Bush Rd 3 Symphony Dr 9864 Pierce Rd 2619 Genesee St RR 1, Box 251 157 Proctor Blvd RR 1, Box 325 21 Canterbury Rd	Poland, NY New Hartford NY Barneveld, NY Herkimer, NY Whitesboro, NY Holland Patent, NY Utica, NY Barneveld, NY Utica, NY Barneveld, NY New Hartford NY

\* ADDITION

\*\* DIED 2/2/95

ADDENDUM signed by:

David R. Milner, Secretary

Date: April 1, 1996