

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000062440

FILED
Jan 06, 2012
Secretary of State

Entity Name: TRISTATE INSURANCE GROUP, INC.

Current Principal Place of Business:

143 WEST STREET, UNIT U
NEW MILFORD, CT 06776

New Principal Place of Business:

Current Mailing Address:

143 WEST STREET, UNIT U
UNIT U
NEW MILFORD, CT 06776 20

New Mailing Address:

FEI Number: 27-0406074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENNESSEY, JAMES G
31087 US HWY 19 NORTH
UNIT U
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HENNESSEY, JAMES J
Address: 143 WEST STREET, UNIT U
City-St-Zip: NEW MILFORD, CT 06776 20

Title: SEC
Name: NORWOOD, JULIE A
Address: 143 WEST STREET
City-St-Zip: NEW MILFORD, 8 06776 20

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAMES HENNESSEY

MR

01/06/2012

Electronic Signature of Signing Officer or Director

Date