

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10240

FILED  
Jan 08, 2004  
Secretary of State

Entity Name: ERA GENERAL AGENCY CORPORATION

## Current Principal Place of Business:

1 CAMPUS DR  
PARSIPPANY, NY 07054 US

## New Principal Place of Business:

## Current Mailing Address:

1 CAMPUS DR  
PARSIPPANY, NY 07054 US

## New Mailing Address:

FEI Number: 48-0824690

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DSV ( ) Delete  
Name: BUCKMAN, JAMES E  
Address: 9 W 57TH ST, 37TH FL  
City-St-Zip: PARSIPPANY, NJ 07054

Title: DP ( ) Delete  
Name: SMITH, RICHARD A  
Address: 1 CAMPUS DR  
City-St-Zip: PARSIPPANY, NY 07054 US

Title: VT ( ) Delete  
Name: COCROFT, DUNCAN H  
Address: 1 CAMPUS DR  
City-St-Zip: PARSIPPANY, NY 07054 US

Title: V ( ) Delete  
Name: HUBER, JOSEPH  
Address: 1 CAMPUS DR  
City-St-Zip: PARSIPPANY, NY 07054 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VT (X) Change ( ) Addition  
Name: WYSHNER, DAVID B T  
Address: 1 CAMPUS DR  
City-St-Zip: PARSIPPANY, NY 07054 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOSEPH HUBER

VP

01/08/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date