**FILED** 

Jul 27, 1999 8:00 am Secretary of State

07-27-1999 90031 042 \*\*\*150.00

## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550' (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P12565

## GERLING GLOBAL REINSURANCE CORPORATION

Principal Place of Business		Mailing Address	Mailing Address		- I CONTRONCION IN CINED IN THE BUILD BUILD OUR R	INTO DIRTO NENIS NINCO COLO DIRTO 1881	
717 FIFTH AVENUE 717 FIFTH AVE					l		
NEW YORK NY 10022 NEW YORK NY 10022							
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					12/16/1986		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For	
21		26	6		13-6107326	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #,					5. Certificate of Status Desired	\$8.75 Additional	
22		27	.7		or commence of ordinar promises	Fee Required	
City & Stat	e	City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28	28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	•	8. This corporation owes the current year		
24	25 29 30		30	intangible Personal Property. Yes No			
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
	715 4 1101 15 4 1107 COL 11 1100 IC		81	Name			
FLORIDA INSURANCE COMMISSIONER			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
THE CAPITOL					.,		
TALLAHASSEE FL			83				
			0.4	014		(a= 7:- C-4-	
			84	City	1	FL 85 Zip Code	
agent. I a	am familiar with, and accept the obl	gations of, section 607.0505, Flor	ida Statutes	<b>S</b> .	coration submits this statement for the purpose attion's board of directors. I hereby accept the a		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register  12. OFFICERS AND DIRECTORS  13.				gent signature re	ADDITIONS/CHANGES TO OFFICERS	<del></del>	
TITLE	PDC		1.1 TITLE	1	ADDITIONAL CHANGES TO OFFICE RO	<del></del>	
			1.2 NAME			Change Addition	
NAME	Niebuhr, Gerhard  s .717 Fifth Avenue		1.2 NAME				
STREET ADDRESS	_		l l	Ì		}	
CITY-ST-ZIP			1.4 CITY-ST	-ZIP			
TITLE	L DECETE		2.1 TITLE	ł		Change Addition	
NAME	TROIANO, CHARLES		2.2 NAME		•	]	
STREET ADDRESS			2.3 STREET	- 1		Ì	
CITY-ST-ZIP	NEW YORK NY 10022		2.4 CITY-S1	-ZIP			
TITLE	D	DELETE	3.1 TITLE			Change Addition	
NAME	STROHSCHEN, NORBERT		3.2 NAME	İ			
STREET ADDRESS	GERLING-KONZERN		3.3 STREET	ADDRESS		ì	
CITY-ST-ZIP	WEST GERMANY		3.4 CITY-\$1	-ZiP			
TITLE ,	D	DELETE	4.1 TITLE			Change Addition	
NAME	ZECH, DR. JUERGEN		4.2 NAME	-			
STREET ADDRESS	GERLING-KONZERN		4.3 STREET	ADDRESS			
CITY-ST-ZIP	WEST GERMANY		4.4 CITY-ST	-ZiP		(	
TITLE	S	DELETE	5.1 TITLE	Je-		Change Addition	
NAME	SMITH, DAVID W.		5.2 NAME				
STREET ADDRESS	717 FIFTH AVE		5.3 STREET	ADDRESS		\	

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

14. 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 annual report or supplemental annual report is five 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 Block 13 if changed, or on an attachment with an address.

DELETE

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS NEW YORK NY 10022

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 0 Y 7

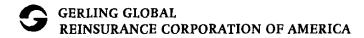
Doutime Shore #

\_ Change

Addition

JEANNE M. MCGUINNESS

**Assistant Secretary** 



717 Fifth Avenue New York, NY 10022-8101 Telephone: 212-754-7575 Fax: 212-821-0498

Email: jeanne mcquinness@qqrca.com

July 8, 1999

Division of Corporations Annual Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Annual Report Filing for Gerling Global Reinsurance Corporation-U.S.

Branch

Dear-Sir/Madam:

Enclosed please find the Annual Report on behalf of Gerling Global Reinsurance Corporation-U.S. Branch and the \$150.00 filing fee. Please be advised that we never received the first Annual Report. Per instructions from Gina, of your office we respectfully request a waiver of the \$400.00 late fee as we never received notice of the first annual report. This is the second year in which this has occurred. Perhaps in future years this document should be sent by certified mail.

Thank you in advance for your attention to this matter.

Yery truly yours,

Jeanne M. McGuinness

lane M. M. Gurren

There in you is see each firs wit ascending to this matter

The devel to the consistence of the first of the paper. This is the proced year to which this has excepted. Fortised in all also perified intelligibles.