

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 10, 1999 8:00 am  
Secretary of State

05-10-1999 90242 009 \*\*\*150.00

DOCUMENT # P17261

1. Corporation Name

THE TRAVELERS ASSET FUNDING CORPORATION

Principal Place of Business

ONE TOWER SQUARE  
HARTFORD CT 06183  
US

Mailing Address

ONE TOWER SQ..  
C/O CORP. TAX 5PB  
HARTFORD CT 06183  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/16/1987

4. FEI Number

06-1216878

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	WHITE, WILLIAM H	
STREET ADDRESS	ONE TOWER SQUARE	
CITY-ST-ZIP	HARTFORD CT	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BRITT, JOHN R.	
STREET ADDRESS	ONE TOWER SQUARE	
CITY-ST-ZIP	HARTFORD CT	
TITLE	V	<input type="checkbox"/> DELETE
NAME	RYAN, GEORGE A.	
STREET ADDRESS	ONE TOWER SQUARE	
CITY-ST-ZIP	HARTFORD CT	
TITLE	T	<input type="checkbox"/> DELETE
NAME	CHAMBERLAIN, CHARLES B	
STREET ADDRESS	ONE TOWER SQUARE	
CITY-ST-ZIP	HARTFORD CT	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SHUGRUE, THOMAS P.	
STREET ADDRESS	ONT TOWER SQUARE	
CITY-ST-ZIP	HARTFORD CT	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 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 Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)

537891-90242-9  
#P12261

**THE TRAVELERS ASSET FUNDING CORPORATION  
DIRECTORS AND OFFICERS  
AS OF DECEMBER 31, 1998**

<u>Directors Name and Home Address</u>	<u>Social Security Number</u>
Joseph E. Rueli, Jr. 65 Somerwynd Lane Suffield, CT 06078	028-38-1891
George A. Ryan 148 Wood Pond Road Farmington, CT 06032	048-34-2758
Thomas P. Shugrue 302 Dale Road Wethersfield, CT 06109	040-60-5213
William H. White 8 Woodchuck Hill Road Canton, CT 06019	044-42-8515

  

<u>Officers Name, Title and Home Address</u>	<u>Social Security Number</u>
William H. White, President 8 Woodchuck Hill Road Canton, CT 06019	044-42-8515
Charles B. Chamberlain, Chief Financial Officer & Treasurer 155 Neiderwerfer Road South Windsor, CT 06074	291-42-1945
Edward Duffy, Vice President 6 Winterberry Lane Glastonbury, CT 06033	049-36-3239
George A. Ryan, Vice President 148 Wood Pond Road Farmington, CT 06032	048-34-2758
Thomas Shugrue, Vice President 302 Dale Road Wethersfield, CT 06109	040-60-5213

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John R. Britt, Secretary  
234 Barbourtown Road  
Collinsville, CT 06022

023-38-2999

Marla A. Berman, Assistant Secretary  
77 Bleecker Street, #223E  
New York, NY 10012

140-56-1375

Guy Graff, Director  
151 Beacon Hill Drive  
West Hartford, CT 06117

157-46-4070

David P. Fleming, Assistant Director  
440 Church Street  
Wethersfield, CT 06109

048-50-4296

Except for Marla Berman, all directors and officers are located at One Tower Square, Hartford, CT 06183. Marla Berman's business address is Citigroup Inc., 425 Park Avenue, New York, NY 10043.