


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2005 8:00 am
Secretary of State

05-09-2005 90288 029 ***150.00

DOCUMENT # P22109 1. Entity Name UTC CORPORATION					
Principal Place of Business ONE FINANCIAL PLAZA HARTFORD, CT 06103				Mailing Address ONE FINANCIAL PLAZA HARTFORD, CT 06103	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 06-0972188	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPC NORD, DAVID 1 FINANCIAL PLAZA HARTFORD, CT 06101	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Controller Richard Pierpont 1 Financial Plaza Hartford CT 06101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HIDEBRAND, CHARLES 1 FINANCIAL PLAZA HARTFORD, CT 06101	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Lauren McGeer 1 Financial Plaza Hartford CT 06101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT IDCZAK, CHRISTIAN 1 FINANCIAL PLAZA HARTFORD, CT 06101	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Christian Idczak
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT KOCOT, PETER 1 FINANCIAL PLAZA HARTFORD, CT 06101	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assit. Controller
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRACHSEL, WILLIAM H 1 FINANCIAL PLAZA HARTFORD, CT 06101	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT WITZKY, CHRISTPOHER 1 FINANCIAL PLAZA HARTFORD, CT 06101	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ 4/25/05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

14017472



04252005 Chg-P CR2E034 (10/03)

4. FEI Number
06-0972188

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPC
NORD, DAVID
1 FINANCIAL PLAZA
HARTFORD, CT 06101

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
HIDEBRAND, CHARLES
1 FINANCIAL PLAZA
HARTFORD, CT 06101

☒ Delete

TITLE
NAME
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AT
IDCZAK, CHRISTIAN
1 FINANCIAL PLAZA
HARTFORD, CT 06101

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

AT
KOCOT, PETER
1 FINANCIAL PLAZA
HARTFORD, CT 06101

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
TRACHSEL, WILLIAM H
1 FINANCIAL PLAZA
HARTFORD, CT 06101

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPT
WITZKY, CHRISTPOHER
1 FINANCIAL PLAZA
HARTFORD, CT 06101

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP Controller
Richard Pierpont
1 Financial Plaza
Hartford CT 06101

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
Lauren McGeer
1 Financial Plaza
Hartford CT 06101

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Christian Idczak

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Assit. Controller

☒ Change ☐ Addition

TITLE
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STREET ADDRESS
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☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #