FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 FEB 27 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P23453 (4)

1. Corporation Name
PIER GROUP, INC.

Principal Place of Business	Mailing Address
% JAMES L. MACNEIL, COOPERS & LYBRAND 100 PEARL ST HARTFORD CT 06103 US	% JAMES L. MACNEIL, COOPERS & LYBRAND 100 PEARL ST HARTFORD CT 06103 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/17/1989
3a. Date of Last Report: 03/02/1994

2. Principal Place of Business
21 C/O James D. Price
Suite, Apt. #, etc.
22 Two Penn Plaza, Suite 1585
City & State
23 New York, N.Y.
Zip 24 10121 Country 25 US

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 51-0316770 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	HERNDON, ROBERT G	12 NAME	
STREET ADDRESS	301 COMMERCE ST. SUITE 600	13 STREET ADDRESS	
CITY-ST-ZIP	FT. WORTH TX	14 CITY-ST-ZIP	
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	PRICE, JAMES D.	22 NAME	
STREET ADDRESS	1172 PARK AVENUE	23 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	24 CITY ST ZIP	
TITLE	VS	31 TITLE	☐ Change ☐ Addition
NAME	BALL, EDWARD L.	32 NAME	
STREET ADDRESS	5820 LINCOLN MEADOWN CIR	33 STREET ADDRESS	
CITY-ST-ZIP	FT. WORTH TX	34 CITY ST ZIP	
TITLE	VT	41 TITLE	☐ Change ☐ Addition
NAME	TILTON, G. MICHAEL	42 NAME	
STREET ADDRESS	4516 NORWICH	43 STREET ADDRESS	
CITY-ST-ZIP	FT. WORTH TX	44 CITY ST ZIP	
TITLE	~~P~~	51 TITLE	☐ Change ☐ Addition
NAME	~~EGRAGTHERE, MICHAEL A~~	52 NAME	DELETE
STREET ADDRESS	~~100 PINE STREET~~	53 STREET ADDRESS	
CITY-ST-ZIP	~~GARDEN CITY NY~~	54 CITY ST ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	BUTLER, SCOTT E.	62 NAME	
STREET ADDRESS	78 D ALDERBROOK DRIVE	63 STREET ADDRESS	
CITY-ST-ZIP	TOPSFIELD MA	64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sec. tion 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 asterisk.

SIGNATURE: * James Price (203)241-7506
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number
JAMES D. PRICE, VICE PRESIDENT