

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P26448**

(1)

1. Corporation Name

ERI - TC II, INC.

Principal Place of Business

**450 POST ROAD EAST
WESTPORT CT 06881**

Mailing Address

**450 POST ROAD EAST
WESTPORT CT 06881**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/13/1989

3a. Date of Last Report

02/07/1994

4. FEI Number

06-1282234

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	PD	STORRS, DAVID K.	450 POST ROAD EAST WESTPORT CT 06881
	GUIDO, MICHAEL J.	450 POST ROAD EAST	WESTPORT CT 06881
	FRANZEE, FRANK T.	450 POST ROAD EAST	WESTPORT CT 06881

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
		1057 FAIRFIELD BEACH	FAIRFIELD, CT 06430	☒	☐
		SECRETARY		☒	☐
		VINCENT W. MCBRIEN		☒	☐
		815 FOREST AVENUE		☒	☐
		WILMETTE, IL 60091		☒	☐
		VICE PRESIDENT		☒	☐
		PAUL JACORELLO		☒	☐
		117 CORA LANE		☒	☐
		LEVITOWN, N.Y. 11756		☒	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul Jacobello

Date

4/13/95

(Signature / Name)