

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

102

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P33661** (0)
1. Corporation Name
CIG MANAGEMENT COMPANY



Principal Place of Business: **260 LONG RIDGE RD. STAMFORD CT 06927 US**
Mailing Address: **% CAPITAL CORPORATION P.O. BOX 9550 FT. MYERS FL 33906-9550**

3. Date Incorporated or Qualified: **04/22/1991**
3a. Date of Last Report: **08/16/1995**

2. Principal Place of Business (21-23) and Mailing Address (26-30) fields with sub-headers for Suite, City & State, and Zip/Country.

4. FEI Number: **51-0333338**
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 (81-85)
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

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 the corporation. (If applicable) (If not applicable) (If not applicable)

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	ROTHMAN, ROBERT	
STREET ADDRESS	8875 HIDDEN RIVER PK 350	
CITY-ST-ZIP	TAMPA FL	
TITLE	EVP	<input type="checkbox"/> DELETE
NAME	GIBBS, THOMAS E.	
STREET ADDRESS	50 LAURA STREET	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	VOSS, DEANNA	
STREET ADDRESS	1100 CARR ROAD	
CITY-ST-ZIP	WILMINGTON DE	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BEALE, CHARLES L.	
STREET ADDRESS	1100 CARR ROAD	
CITY-ST-ZIP	WILMINGTON DE	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	GARRITY, MARTIN A.	
STREET ADDRESS	1100 CARR ROAD	
CITY-ST-ZIP	WILMINGTON DE	
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	

SEE ATTACHED

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***200.00

2/4/96

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 119.07(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: Gary J. Schulman 4/8/96 2033574544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

B27 CIG Management Company
51-0333338

Name	Title	Business Address
David G. Amble	Director	260 Long Ridge Road Stamford CT 06927
Edward D. Stewart	Director	600 Hart Road Barrington IL 60010
Edward A. Tilly	President	260 Long Ridge Road Stamford CT 06927
David G. Amble	Senior Vice President	260 Long Ridge Road Stamford CT 06927
Brian T. McAnaney	Senior Vice President	260 Long Ridge Road Stamford CT 06927
Marcia Whitaker	Vice President	6601 Six Forks Road Raleigh NC 27615
Brian T. McAnaney	Secretary	260 Long Ridge Road Stamford CT 06927
Marcia Whitaker	Treasurer	6601 Six Forks Road Raleigh NC 27615
Dennis R. Sweeney	Assistant Treasurer	777 Long Ridge Road Stamford CT 06927
John C. Willie	Assistant Treasurer	260 Long Ridge Road Stamford CT 06927
Elaine S. Keller	Assistant Treasurer - Taxes	777 Long Ridge Rd. Stamford CT 06927
William Brennan	Assistant Treasurer - Taxes	777 Long Ridge Rd. Stamford CT 06927
Donald E. Montgomery	Assistant Treasurer - Taxes	777 Long Ridge Road Stamford CT 06927
Joseph T. Cassidy	Assistant Treasurer - Taxes	777 Long Ridge Rd. Stamford CT 06927
Scott Robert	Assistant Treasurer - Taxes	777 Long Ridge Rd. Stamford CT 06927
Gary J. Schulman	Assistant Treasurer - Taxes	777 Long Ridge Rd. Stamford CT 06927