

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90229 016 ***150.00

DOCUMENT # P39200

1. Entity Name
FIRST INDEMNITY OF AMERICA INSURANCE COMPANY

Principal Place of Business

119 LITTLETON ROAD
PARSIPPANY NJ 07054
US

Mailing Address

119 LITTLETON ROAD
PARSIPPANY NJ 07054
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

22-2291229

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

FLORIDA INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32399-0300

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	<input type="checkbox"/> Delete
NAME	RUNNE, GLENN A	
STREET ADDRESS	26 WENONAH AVENUE	
CITY-ST-ZIP	LAKE HIAWATHA NJ	
TITLE	TD TEEVAN, JOHN P JR TEEVAN, JOHN P JR	<input type="checkbox"/> Delete
NAME		
STREET ADDRESS	48 CENTERVILLE ROAD	
CITY-ST-ZIP	HOLMDEL NJ	
TITLE	D	<input type="checkbox"/> Delete
NAME	DOLAN, EDWIN A JR.	
STREET ADDRESS	100 VAIL ROAD MT	
CITY-ST-ZIP	PARSIPPANY NJ	
TITLE	V	<input type="checkbox"/> Delete
NAME	BLAZIER, MOIRA M	
STREET ADDRESS	197 ELKWOOD AVENUE	
CITY-ST-ZIP	NEW PROVIDENCE NJ	
TITLE	D	<input type="checkbox"/> Delete
NAME	TEEVAN, MARTIN O	
STREET ADDRESS	33 SEVEN OAK CIRCLE	
CITY-ST-ZIP	HOLMDEL NJ	
TITLE	D	<input type="checkbox"/> Delete
NAME	LYNCH, PATRICK J	
STREET ADDRESS	15 NORTH RIDGE ROAD	
CITY-ST-ZIP	DENVILLE NJ	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LUISI, KATHY A.	
STREET ADDRESS	295 PARK AVENUE	
CITY-ST-ZIP	WESTBURY, NY 11590	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TOMAE, ANTHONY	
STREET ADDRESS	46 RAVEN ROAD	
CITY-ST-ZIP	COLTS NECK, NJ 07722	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RESSA, PHILIP	
STREET ADDRESS	180 COVENTRY ROAD	
CITY-ST-ZIP	STATEN ISLAND, NY 10304	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOSEPH C. GLAVIN, JR.	
STREET ADDRESS	36 A MT. LAUREL LANE	
CITY-ST-ZIP	BRIELLE, NJ 08730	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEST, THOMAS O.	
STREET ADDRESS	604 FOREST EDGE LANE	
CITY-ST-ZIP	OVILLA, TX 75154	
TITLE	O/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LYNCH, JANE E.	
STREET ADDRESS	15 NORTH RIDGE ROAD	
CITY-ST-ZIP	DENVILLE, NJ 07834	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Glenn A Runne **Glenn A Runne**

Date

Daytime Phone #

10/16/02 973-402-1206

CR2E034 (9/01)