

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 15, 2001 8:00 am**  
**Secretary of State**

03-15-2001 90212 031 \*\*\*150.00

**DOCUMENT # V41766**

1. Entity Name

**COUNTERSIGNATURE AGENCY, INC.**

Principal Place of Business

Mailing Address

**7840 WOODLAND CENTER BLVD.  
TAMPA FL 33614  
US**

**P.O. BOX 30094  
TAMPA FL 33630-3094  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**06-1345091**

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

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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.

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, 2001 Fee will be \$550.00  
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **S** ☐ Delete  
NAME **EDDY, PAUL**  
STREET ADDRESS **ONE TOWER SQUARE**  
CITY-ST-ZIP **HARTFORD CT**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **V** ☐ Delete  
NAME **GUERTIN, WENDY**  
STREET ADDRESS **7840 WOODLAND CENTER BLVD**  
CITY-ST-ZIP **TAMPA FL 33614**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **CD** ☐ Delete  
NAME **BAILY, NANCY L**  
STREET ADDRESS **7840 WOODLAND CENTER BLVD**  
CITY-ST-ZIP **TAMPA FL 33614**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **PD** ☐ Delete  
NAME **GRINER, DAVID H.**  
STREET ADDRESS **7840 WOODLAND CENTER BLVD.**  
CITY-ST-ZIP **TAMPA FL 33614**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **TD** ☐ Change ☒ Addition  
NAME **HILL, JOHN S.**  
STREET ADDRESS **7840 Woodland Center Blvd**  
CITY-ST-ZIP **Tampa FL 33614**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **V** ☐ Change ☒ Addition  
NAME **LEBENS, JOHN**  
STREET ADDRESS **7840 Woodland Center Blvd**  
CITY-ST-ZIP **Tampa FL 33614**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Paul H. Eddy**

**3/12/01**

Date

**860 277-3536**

Daytime Phone #

CR2E034 (10/00)

634020  
attachment  
D# 141766

**2001 UNIFORM BUSINESS REPORT (UBR)  
COUNTERSIGNATURE AGENCY, INC.**

11. (continued)

**OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

V  
RYAN, GEORGE A.  
One Tower Square  
Hartford, CT 06183

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

AT  
CHAMBERLAIN, CHARLES B.  
One Tower Square  
Hartford, CT 06183

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

AT  
QUAGGIN, JR., GEORGE M.  
One Tower Square  
Hartford, CT 06183

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

AS  
CONE, PERRY I.  
7840 Woodland Center Blvd  
Tampa, FL 33614