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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

F9400006508 (5)

DOCUMENT # 1. Corporation Name

FLEET CAPITAL CORPORATION

SHAWMUT CAPITAL CORPORATION



Principal Place of Business 200 GLASTONBURY BLVD

200 GLASTONBURY BLVD GLASTONBURY CT 06033

Mailing Address

QD.	49 I UMBUN	1 (-1 00000		ODASTOR	00111 01 00000						
								3. Date Incorporated or Qu	ualified 3	a. Date of La	=
								12/20/1994		04/27	
2. Pri	incipal Plac	e of Busine	ess	2a. Mailing /	2a. Mailing Address			4. FEI Number			Applied For
21				26	26			06-1413030			Not Applicable
Su 22	Suite, Apt. #, etc.			Fn	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required			
	City & State				City & State			6. Election Campaign Fina	ncing _	_ \$!	5.00 May Be
23	,y a olare			28				Trust Fund Contribution	,		dded to Fees
Zıp			Country	Zip		Country		8. This corporation has lia	bility for intar	ngible tax und	er s. 199.032,
24			25	29	[3	30		Florida Statutes	☐ Yes 💆	₹ No	
	•	9. Name	and Address of Curr	ent Registered Ag	ent	-		10. Name and Address o	f New Regi	stered Ageni	
٠,						81	Name				
	PT CAR	OCEATION	S EVETEM			00	C+	ddress (P.O. Box Number is Not A	rccontable)		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD						82	Street A	Logress (F.O. Box Number is Not A			and a field of the first and first a
	PLANTATION FL 33324										
						84	City			FL 85	Zip Code
				00 - 1002 1000 1	In do Ct-t t	the object	1	rporation submits this statement fo	v the purpos	o of changing	its registered office
f	or registere am.liar with IATURE	d agent, or n, and acce	both, in the State of Hi pt the obligations of, Se	orida Such change eption 607.0505, Fid	was authorized irida Statutes	by the corp	ioration s t	poard or directors. Thereby accept	the appoint	DAIE	ered agent. I am
		ignature type i	or printed name of registered as		L. 1.7.) F		K Ser Jihroth	ADDITIONS/CHANGES	TO OFFICE		CTORS IN 12
12.			OFFICERS A	AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES	TO OFFICE	Cha	
TITLE		PD		L.	J DECEM						anga in an
NAME		TEICH,				1.2 NAME					
STREET	F AD DRESS		LLERIA PKWY NW				1 ADDRESS				
CITY-S	ST-ZIP	ATLAN	TA GA		3.00, 516	14 CITY-	ST-7P			□ Cha	inge Addition
TITLE		VSD		L) DECETE	2 1 TITLE	ŀ			L] Gia	inge [_] Notation
NAME			IN, BRUCE	_		2.2 NAME					
STREET	T ADDRESS	200 GI	awstonbury bl/	VD		23 STREE	PRANCA T				
CITY-S	ST-ZIP	GLAST	ONBURY CT			2 4 CiTy -				<u> </u>	one CD Addition
THILE		T] DELFTE	3 1 TIJLE				Cha	ange 🔲 Addition
NAME			ski, Łouis			3.2 NAME	,				
STREET	T ADDRESS		ASTONBURY BLVD)		3.3 S1RS	-1 ADDRESS				
CITY-S	ST-71P	GLAST	ONBURY CT			3.4 C(F)	S1 - 7/F				FTI Addition
TITLE		٧] DELETE	4 1 Title				☐ Cha	ange 🔲 Addition
NAME		BAILEY	r, rosemary			4.2 NAME					
STREE	1 ADORESS	200 GI	ASTONBURY BLVD)		4 3 STREE	LADORESS	00000	182.	4280	ı
CITY	ST-ZiP	GLAST	ONBURY CT			4.4 CHY -	ST 70	-05/16/96-	0103'	5016	
TITLE		VD] DELETE	5 1 TiTLE	.	***200.00		Cha	ange 🔲 Addition
NAME		FARLE	Y, MICAHEL			5.2 NAME					
STREE	LADDRESS		LASTOBURY BLVD			5.3 STREE	FADDRESS				
CiTY-	ST-2/P	GLAST	ONBURY CT			540111	ST-ZIF				
TITLE		С] DELETE	6 1 1 TLE				Cn:	ange 🔲 Addition
NAMÉ		BLAND), Pete r			6.2 NAME					
STREE	T ADDRESS		LASTONBURY BLVD)		6.3 STREE	T ADDRESS				
ĺ	\$1 - ZIP		ONBURY CT			6.4 CITY -	S1 - ZiP				
					 						

14. I do hereby certify that the information supplied with this fung 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 13 if changed, or on an attachment with an address

SIGNATURE:

4/22/96 (860)659-3000 SCr 5-1-96

CR2E034 (12/95)