

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 22, 2000 8:00 am**  
**Secretary of State**

04-22-2000 90072 044 \*\*\*150.00

**00068891**

**DOCUMENT #** 820958 ✓  
**i. Entity Name**  
**ELECTRIC INSURANCE COMPANY**

<b>Principal Place of Business</b> 152 Conant Street Beverly, MA 01915	<b>Mailing Address</b> 152 Conant Street Beverly, MA 01915
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<b>2. Principal Place of Business</b> same as above	<b>3. Mailing Address</b> same as above
Suite, Apt. #, etc. "	Suite, Apt. #, etc. "
City & State "	City & State "
Zip "	Country USA

<b>4. FEI Number</b> 04-2422119	Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**  
 Insurance Commissioner  
 State of Florida  
 Capitol Bldg.  
 Tallahassee, FL 32304

**7. Name and Address of New Registered Agent**

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b> 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** \_\_\_\_\_ (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, 2000 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**

<b>TITLE</b> PDC	<input type="checkbox"/> Delete
<b>NAME</b> David F. St. Laurent	
<b>STREET ADDRESS</b> 1 Virginia Place	
<b>CITY-ST-ZIP</b> Wenham, MA 01984	
<b>TITLE</b> S	<input type="checkbox"/> Delete
<b>NAME</b> Virginia A. McCarthy	
<b>STREET ADDRESS</b> 24 Olofsson Street	
<b>CITY-ST-ZIP</b> Braintree, MA	
<b>TITLE</b> V/D	<input type="checkbox"/> Delete
<b>NAME</b> Walter P. Foley	
<b>STREET ADDRESS</b> 17 Swan Pond Road	
<b>CITY-ST-ZIP</b> N. Reading, MA 01864	
<b>TITLE</b> V/D	<input type="checkbox"/> Delete
<b>NAME</b> Laurence J. Cohen	
<b>STREET ADDRESS</b> 16 Pat Drive	
<b>CITY-ST-ZIP</b> Danvers, MA 01923	
<b>TITLE</b> D	<input type="checkbox"/> Delete
<b>NAME</b> Dennis J. Dougherty	
<b>STREET ADDRESS</b> 45 Turtle Lane	
<b>CITY-ST-ZIP</b> N. Andover, MA 01845	
<b>TITLE</b> V/D	<input checked="" type="checkbox"/> Delete
<b>NAME</b> Steven Geistfeld	
<b>STREET ADDRESS</b> 14 Dartmouth Road	
<b>CITY-ST-ZIP</b> Ipswich, MA 01938	

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

<b>TITLE</b> V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>NAME</b> Maureen Hegarty	
<b>STREET ADDRESS</b> 43 Taylor Street	
<b>CITY-ST-ZIP</b> Saugus, MA 01906	
<b>TITLE</b> V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>NAME</b> David J. Lovely	
<b>STREET ADDRESS</b> 2 Landau Lane	
<b>CITY-ST-ZIP</b> Merrimack, MA 01860	
<b>TITLE</b> V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>NAME</b> Angelo C. Renna	
<b>STREET ADDRESS</b> 19 Court Lane	
<b>CITY-ST-ZIP</b> Ipswich, MA 01938	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	

**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:** *Virginia A. McCarthy* **Secretary** **4/14/00** **978-524-5249**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

attach  
code 8891  
# 820958

#11. Officers and Directors (cont'd)

	<u>title</u>
Gerard P. McCarthy 82 Lincoln Street Belmont, MA 02178	V/D
Elizabeth M. Thompson 15 Cherry Road N. Hampton, NH 03862	V/D
Michael G. Crasnick 55 Stoneymeade Way Acton, MA 01729	V/D
Tena-Michel 675 Tremont Street Boston, MA 02118	V/D