

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P37797 (8)**
1. Corporation Name
FAIRFIELD INSURANCE COMPANY



Principal Place of Business: P.O. BOX 10167, STAMFORD CT 06904-2167
Mailing Address: P.O. BOX 10167, STAMFORD CT 06904-2167

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	03/06/1992	03/24/1995
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	4. FEI Number	Applied For
23. City & State	28. City & State	06-1325512	Not Applicable
24. Zip	29. Zip	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
25. Country	30. Country	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
THE FLORIDA INSURANCE COMMISSIONER THE CAPITOL TALLAHASSEE FL 32399-0300		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	FL 85. Zip Code

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: _____ (NOTE: Registered Agent signature required when changing office or registered agent.) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	WARREN, WILLIAM DAVID	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	111 DUNCAN DR	12. NAME	
STREET ADDRESS	GREENWICH CT	13. STREET ADDRESS	
CITY- ST- ZIP		14. CITY- ST- ZIP	
TITLE	DV	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHENEY, PETER ALEXANDER	22. NAME	
STREET ADDRESS	225 E 57TH STREET APT 12-F	23. STREET ADDRESS	
CITY- ST- ZIP	NEW YORK NY	24. CITY- ST- ZIP	
TITLE	DV	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCAFFREY, TIMOTHY T.	32. NAME	
STREET ADDRESS	30 LUDLOW RD	33. STREET ADDRESS	
CITY- ST- ZIP	WESTPORT CT	34. CITY- ST- ZIP	
TITLE	DV	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EAGER, ROBERT WILLIAM JR	42. NAME	
STREET ADDRESS	262 WHITE OAK SHADE RD	43. STREET ADDRESS	
CITY- ST- ZIP	NEW CANAAN CT	44. CITY- ST- ZIP	
TITLE	VS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	QUINN, ANNE MICHELE	52. NAME	
STREET ADDRESS	148 STAMFORD AVE	53. STREET ADDRESS	
CITY- ST- ZIP	STAMFORD CT	54. CITY- ST- ZIP	
TITLE	T	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AHEARN, JOHN FRANCIS	62. NAME	
STREET ADDRESS	6 BRONSON AVE	63. STREET ADDRESS	
CITY- ST- ZIP	SCARSDALE NY	64. CITY- ST- ZIP	

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: *John F. Ahearn* (203) 329-7700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John F. Ahearn, Vice President and Controller

CR2E034 (12/95)