FILED 2000 UNIFORM BUSINESS REPORT (UBR) Jun 06, 2000 8:00 am Secretary of State DOCUMENT # 837141 Entity Name 06-06-2000 90485 024 ***150.00 **EVEREST REINSURANCE COMPANY** Mailing Address Principal Place of Business 477 MARTINSVILLE RD 477 MARTINSVILLE RD C0100246 LIBERTY CORNER, NJ LIBERTY CORNER, NJ 07938 07938 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State FEI Numbe Applied For 22-2005057 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STATE INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) CAPITOL BUILDING TALLAHASSEE FL 32304 City 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 Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS Change Change ☐ Addition ☐ Delete TITLE TITLE FISCHER, WILLIAM A. TARANTO, JOSEPH V. 477 MARTINSVILLE RD TARANTO NAME NAME 477 MARTINSVILLE RD. STREET ADDRESS STREET ADDRESS LIBERTY CORNER, NJ 07938 CITY-ST-ZIP CITY-ST-ZIP LIBERTY CORNER, NJ 07938 V/DI-X Change Addition v7ś~ TITLE □ Delete LIMAURO, STEPHEN L. BURAK, JANET J. NAME 477 MARTINSVILLE RD. 477 MARTINSVILLE RD. STREET ADDRESS STREET ADDRESS CITY, ST. 7IP LIBERTY CORNER, NJ 07938 CITY-ST-ZIP LIBERTY CORNER, NJ 07938 Change X Addition TITLE **V/**D ``--TITLE ☐ Delete FRAKES, LARRY A. 477 MARTINSVILLE RD. THOMAS_J. GALLAGHER NAME NAME 477 MARTINSVILLE RD. STREET ADDRESS STREET ADDRESS LIBERTY CORNER, NJ 07938 LIBERTY CORNER, NJ 07938 CITY-ST-ZIP CITY-ST-ZIP X Addition Change ☐ Detete TITLE D TITLE MESTMAN STEVEN A NAME 477 MARTINSVILLE RD STREET ADDRESS STREET ADDRESS LIBERTY CORNER, NJ 07938 CITY-ST-ZIP CITY-ST-ZIP ☐ Change **X** Addition ☐ Delete TITLE NAME SCHMITT, DAVID E. NAME STREET ADDRESS 477 MARTINSVILLE RD STREET ADDRESS LIBERTY CORNER, NJ 07938 CITY-ST-ZIF CITY-ST-ZIP □ Change ☐ Addition DITE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

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April 20, 2000 (908) 604-3000 SIGNATURE: JANNATHRE TOR OF VICE PRESIDENT. GENERAL COUNSEL & SECRETARY

all other like empowered

changed, or on an attachment with