

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 MAY 14 PM 12:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

Worldwide Insurance Company
d/b/a Worldwide Underwriters Insurance
Company

2. Principal Office Address

500 South Broad Street

Suite, Apt. #, etc.

City & State

Meriden, CT

Zip

06450

Country

USA

3. Mailing Office Address

500 South Broad Street

Suite, Apt. #, etc.

City & State

Meriden, CT

Zip

06450

Country

USA

REINSTATEMENT 00-03

**4. Date Incorporated or Qualified
To Do Business in Florida**

2/5/80

5. FEI Number

39-1341441

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Chief Financial Officer

Street Address (P.O. Box Number is Npt Acceptable)

200 East Gaines Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32399-0000

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
C/D	Mory Katz	500 South Broad Street	Meriden, CT 06450
P/D	John J. Javaruski	500 South Broad Street	Meriden, CT. 06450
VP/S/D	August P. Alegi	500 South Broad Street	Meriden, CT 06450
VP/T/D	George Kowalsky	500 South Broad Street	Meriden, CT 06450
VP/D	Francis M. Quido	500 South Broad Street	Meriden, CT 06450
VP/D	Danny A. Collins	500 South Broad Street	Meriden, CT 06450

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(f), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August P. Alegi

May 12, 2003

203-634-7246

Date

Daytime Phone #

CR2E081 (10/02)



May 13, 2003

BY FED EX

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

- Re: (1) Corporate Reinstatement Application
Worldwide Insurance Company d/b/a Worldwide Underwriters
Insurance Company
- (2) 2003 For Profit Corporation Uniform Business Reports
- Response Insurance Company
 - Worldwide Direct Auto Insurance Company

Dear Sir or Madam:

Enclosed are:

- A Corporate Reinstatement application for Worldwide Insurance Company d/b/a Worldwide Underwriters Insurance Company, along with a check in the amount of \$1,200; and
- 2003 For Profit Corporation Uniform Business Reports for Response Insurance Company and Worldwide Direct Auto Insurance Company, as well as two checks each in the amount of \$550.00.

If you have any questions concerning this matter, please feel free to call me.

Very truly yours,

David I. Schonbrun
Deputy General Counsel
(888) 288-6080 x7253
dschonbrun@response.com

Enclosures

Response Insurance

500 South Broad Street • Meriden, CT 06450 • Tel: 203-634-7200 • Fax: 203-634-7315