

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 30 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **801519**

1. Corporation Name

NORTH AMERICAN COMPANY FOR LIFE AND HEALTH INSURANCE

Principal Place of Business

Mailing Address

~~222 S. RIVERSIDE PLAZA~~
~~P.O. BOX 466~~
~~CHICAGO IL 60606~~

C/O MIDLAND NAT'L LIFE
ONE MIDLAND PLAZA
SIOUX FALLS SD 57193-0001

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10/04/1921

Suite, Apt. #, etc.

525 WEST VAN BUREN

Suite, Apt. #, etc.

City & State
CHICAGO IL

City & State

Zip
60607

Country
USA

Zip

Country

5. FEI Number

36-2428931

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

SEE ATTACHED

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
CEO CP	MASTERTON, MICHAEL M	222 S RIVERSIDE PLAZA 525 W VAN BUREN	CHICAGO IL 60606 CHICAGO IL 60607
VTD DV	CRAIG, IIJJ CRAIG, JOHN J. II	222 S RIVERSIDE PLAZA 525 W VAN BUREN	CHICAGO IL 60606 CHICAGO IL 60607
VSD	HORVAT, STEPHEN P HORVAT, STEPHEN P. JR	222 S RIVERSIDE PLAZA 525 W VAN BUREN	CHICAGO IL 60606 CHICAGO IL 60607
P D	TURNER, EA BAKER, ROLAND C.	222 S RIVERSIDE PLAZA 5342 SOUTH SHORE DRIVE	CHICAGO IL 60606 CHICAGO IL 60615
VG VT	MEYER, TM MEYER, THOMAS M.	222 S RIVERSIDE PLAZA 525 W VAN BUREN	CHICAGO IL 60606 CHICAGO IL 60607
D.	BUNN, WILLARD III	9 MARKET SQUARE COURT	LAKE FOREST IL 60045

8. Name and Address of Current Registered Agent

9. Name and Address of ~~New~~ Registered Agent **CORRECTION**

~~CHIEF FINANCIAL OFFICER~~ **INCORRECT TITLE**
~~P.O. BOX 6200 (32314-6200)~~
200 E. GAINES ST
TALLAHASSEE FL 32399

Name

FLORIDA DIRECTOR OF INSURANCE

Street Address (P.O. Box Number is Not Acceptable)

200 E GAINES ST

Suite, Apt. #, Etc.

THE LARSON BUILDING

City

TALLAHASSEE

State

FL

Zip Code

32399

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE

REGISTERED AGENT MUST SIGN

Date

900024264519
10/30/03--01005--009 **150.00

11. 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)(i), 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

STEPHEN P. HORVAT, JR

Date

10/28/03

Daytime Phone #

312-648-7600

CR2E040 (7/03)

NORTH AMERICAN COMPANY FOR LIFE AND HEALTH INSURANCE
Application for Reinstatement
Document #801519

7. Names and Street Addresses of Each Officer and/or Director (continued)

Title	Name	Street Address	City/State/Zip
DV	GASPAR, GARY J.	525 W VAN BUREN	CHICAGO IL 60607
D	HEINZ, WILLIAM D.	ONE IBM PLAZA	CHICAGO IL 60611
D	KORBA, ROBERT W.	5949 SHERRY LANE, STE 1900	DALLAS TX 75225
V	GARLOCK, GARTH A.	525 W VAN BUREN	CHICAGO IL 60607
V	IVERSON, DONALD J.	ONE MIDLAND PLAZA	SIOUX FALLS SD 57193
V	NEWSOME, JON P.	4601 WESTOWN PKWY, STE 300	WEST DES MOINES IA 50266
V	ROHR, BRIAN P.	525 W VAN BUREN	CHICAGO IL 60607

Stephen P. Horvat, Jr.
Senior Vice President-General Counsel & Secretary



Members of the Sammons Financial Group

VIA OVERNIGHT DELIVERY

October 28, 2003

Department of State
Division of Corporations
Annual Report/Reinstatement Section
409 East Gaines Street
Tallahassee, Florida 32399

RE: Application for Reinstatement from Administrative Dissolution
North American Company for Life and Health Insurance
Document #801519

Dear Department of State:

We recently were notified that North American Company for Life and Health Insurance ("North American") was administratively dissolved for failure to file its 2003 Uniform Business Report ("UBR") with your Department.

Upon investigation, we have determined that North American never received its 2003 UBR form or any other notices from your Department, including a notice of a determination of administrative dissolution, as required by F.S.A. §607.1421(1).

We have enclosed a completed Application for Reinstatement with the following corrections noted thereon:

1. *Principal Place of Business.* Current principal office address is 525 West Van Buren, Chicago IL 60607.
2. *Officers & Directors.* Correction of titles, names and addresses; and addition of officers and directors (including an attached sheet).
3. *Registered Agent.* Correction of the title and address for the Florida Department of Insurance Regulation. Our registered agent has not changed. Please note, it is our understanding that your Department will accept this form without the signature of the Director of Insurance.

In addition, we respectfully request a waiver of the reinstatement fee since North American did not receive any advance notice of the administrative dissolution from your Department. In anticipation of your cooperation with our request, we have enclosed a check for the filing fee in the amount of \$150 made payable to the Florida Department of State.

Thank you in advance for your cooperation with this matter. If you have any questions or need additional information, please do not hesitate to contact me.

Sincerely

A handwritten signature in black ink, appearing to read 'Stephen P. Horvat, Jr.'.

Stephen P. Horvat, Jr.
Senior Vice President-General Counsel & Secretary