

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

01 OCT 31 AM 11:54

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **819105**

1. Corporation Name
AMERICAN SUMMIT INSURANCE COMPANY

Principal Place of Business Mailing Address
 1111 ASHWORTH ROAD 1111 ASHWORTH ROAD
 WEST DES MOINES IA 50265 WEST DES MOINES IA 50265
 US US

Handwritten initials



REINSTATEMENT 2001

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	
		PO Box 2650		10/22/1965	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number	
		Waco, Texas		41-0776214	
City & State		City & State		Applied For	
		76702-2650		Not Applicable	
Zip		Country		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
		United states		\$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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PDC DC	MURPHY, JAMES E.	4656 E. FOOTHILL DRIVE	PARADISE VALLEY AZ
VPD PD	MURPHY, JOHN F. Gregory D. Vanek	1111 ASHWORTH RD 3030 Bosque Ridge	WEST DES MOINES IA 50265 Crawford, Tx 76638
TD S	LIMBERG, KENNETH J. William Charles Stanton	10492 N. 7TH PLACE 9907 Sandalwood	PHOENIX AZ Waco, TX 76712
D	BLANCHAR, JON W.	25 NORMAN RIDGE DR.	BLOOMINGTON MN
SD	MURPHY, JAMES L.	9639 WYOMING CIRCLE	BLOOMINGTON MN
D V	DIVINE, ROBERT L	3413 E BURNSVILLE PKWY	BURNSVILLE MN

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent	
INSURANCE COMMISSIONER CAPITOL TALLAHASSEE FL 32399-0300	Name	
	Street Address (P.O. Box Number is Not Acceptable)	
	Suite, Apt. #, Etc.	
	City	State FL
		Zip Code

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.

300004696393--7
 -11/28/01--01016--015
 ****750.00 ****750.00

Signature of Registered Agent _____ **SIGNATURE REQUIRED** _____ Date _____
 REGISTERED AGENT MUST SIGN

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: *Gregory D. Vanek* **SIGNATURE REQUIRED** _____ Date 10-24-01 Daytime Phone # 254-756-5531
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (8/01)

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V	John Pleskovitch	21631 Nth 45 th	Phoenix, Az 85050
V	Erica Bowsher	4411 N. 28 th Pl	Phoenix, Az 85016
VD	Richard Murphy	4610 N 68 th #422	Scottsdale, Az
D	Charles Clifton Robinson	815 Forest Oaks	Waco, Tx 76712
D	Gordon B. Robinson	2121 Ridgewood	Waco, Tx 76710
D	Carl D. Kirk	1009 Prairie Lane	McGregor, Tx 76657

