PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REI STATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT#

1. Corporation Name

REALM NATIONAL INSURANCE COMPANY

Principal Place of Business

Mailing Address

125 MAIDEN LANE NEW YORK NY

125 MAIDEN LANE

NEW YORK NY

FILED

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SECRETARY OF STATE TALLAHASSEE. FLORIDA



REINSTATEMENT

Suite, Apt. #, etc. Suite, Ap	ii apove	addresses are incorrect in any way, line t	hrough incorrect	t information and en	ter correction below.	ĺ			
Solida Applied For State Solida Applied For Address and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Solida Applied For Address of Each Officer and/or Director Solida Applied For Address of Each Officer and/or Directo				3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida O9/08/1975		
City & State Country Country Country Country Country CERTIFICATE OF STATUS DESIRED S3.75 Additional Field for a Certificate of Status Desired Country Certificate of Status Desired Certificate of Status Desired Country Certificate of Status Desired Certific	Suite, Apt.	#, etc.	Suite, Apt.	Suite, Apt. #, etc.					
Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Name of Officers 3 Street Address of Each Officer and/or Directors 2 Name of Officers 3 Street Address of Each Officer and/or Directors 3 Officer and/or Director 4 City / State / Zip CEO CRANE, ANDREW S C.R. N.E. STEPHEN A. S GREEN, DANNY 7 JOHNNY COURT RED BANK NJ 07701 V FENWICK, FRANCIS J 5 MAE COURT PARK RIDGE NJ 07656 V SHEENEN, MICHAEL W 722 W END STREET CLIFFSIDE PARK NJ 07010 V ZINNERT, RONATA L 125 MAIDEN LANE, 5TH FLOOR NEW YORK NY 10038 P SIOMA, MARK S 171 E 84TH STREET, APT 21C NEW YORK NY 10028 8. Name and Address of Current Registered Agent Name THE PRENTICE - HALL CORP SYSTEMS INC 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	Only a one			/ & State					
Title(s) Name of Officers and/or Directors Street Address of Each Officer and/or Director CEO CRANE, ANDREW S CRANE, STEPHEN A. SGREEN, DANNY 7 JOHNNY COURT RED BANK NJ 07701 PARK RIDGE NJ 07656 V SHEENEN, MICHAEL W T22 W END STREET CLIFFSIDE PARK NJ 07010 V ZINNERT, RONATA L 125 MAIDEN LANE, 5TH FLOOR REW YORK NY 10038 171 E 84TH STREET, APT 21C NEW YORK NY 10028 8. Name and Address of Current Registered Agent Name THE PRENTICE - HALL CORP SYSTEMS INC 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				Country		6. T			
Name and Address of Current Registered Agent Name and Address of Current Registered Agent Name and Address of Name and Address of New Registered Agent Name Street Address of Lach Officer and/or Director 4 City / State / Zip Address of Lach Officer and/or Director 4 City / State / Zip Address of Lach Officer and/or Director 4 City / State / Zip Address of Lach Officer and/or Director 4 City / State / Zip Address of Lach Officer and/or Director 4 City / State / Zip City NEW YORK NY 10022 2 New YORK NY 10028 Street Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) State / Zip Code FL Zip Code FL	Names	and Street Addresses of Each Officer an	d/or Director (F	lorida nonprofit corp	orations must list at le	ast 3 directors)		··	
S GREEN, DANNY 7 JOHNNY COURT RED BANK NJ 07701 V FENWICK, FRANCIS J 5 MAE COURT PARK RIDGE NJ 07656 V SHEENEN, MICHAEL W 722 W END STREET CLIFFSIDE PARK NJ 07010 V ZINNERT, RONATA L 125 MAIDEN LANE, 5TH FLOOR NEW YORK NY 10038 P SIOMA, MARK S 171 E 84TH STREET, APT 21C NEW YORK NY 10028 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent THE PRENTICE - HALL CORP SYSTEMS INC 1201 HAYS STREET SUITE 105 Street Address (P.O. Box Number is Not Acceptable) City State Zip Code		Name of Officers	Officer and for Director						
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V ZINNERT, RONATA L 125 MAIDEN LANE, 5TH FLOOR NEW YORK NY 10038 171 E 84TH STREET, APT 21C NEW YORK NY 10028 8. Name and Address of Current Registered Agent Name Name Name Street Address (P.O. Box Number is Not Acceptable) SUITE 105 TALLAHASSEE FL 32301 City State Zip Code	V	SHEENEN, MICHAEL W	722 W END STREET		CLIFFSIDE PARK NJ 07010				
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name THE PRENTICE - HALL CORP SYSTEMS INC 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 State Zip Code FL	V	 	125 MAIDEN LANE, 5TH FLOOR		NEW YORK NY 10038				
THE PRENTICE - HALL CORP SYSTEMS INC 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. Zip Code	P	SIOMA, MARK S	171 E 84TH S	171 E 84TH STREET, APT 21C		NEW YORK NY 10028			
THE PRENTICE - HALL CORP SYSTEMS INC 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Name Street Address (P.O. Box Number is Not Acceptable) Suite: Apt. #, Etc. City State FL Zip Code	• .	8. Name and Address of Current	Registered Ag	jent		9. Name and	Address of New Pagistared	Agent	
1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Street Address (P.O. Box Number is Not Acceptable) City State FL Zip Code	THE PRENTICE - HALL CORP SYSTEMS INC 1201 HAYS STREET				Name	Nama			
TALLAHASSEE FL 32301 City State FL Zip Code					Street Address (P.O. Box Number is Not Acceptable)				
FL FL		*							
							FL		
D. 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.). I, being	appointed the registered agent of the ab	ove named corp	oration, am familiar	with and accept the of	bligations of Sec	tion 607.0505, F.S. or 617.050	5, F.S.	

Signature of

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 filling 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:

Daytime Phone #