

13182

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 JAN 11 PM 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 847601

1. Corporation Name

Darwin National Assurance Company

2. Principal Office Address

9 Farm Springs Road

Suite, Apt. #, etc.

3. Mailing Office Address

9 Farm Springs Road

Suite, Apt. #, etc.

City & State

Farmington, CT

Zip

06032

Country

USA

City & State

Farmington, CT

Zip

06032

Country

USA

CR2E081 (8/05)

4. Date Incorporated or Qualified To Do Business in Florida

January 14, 1972

5. FEI Number

56-0997452

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

CT Corporation System

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

1203 Governors Square Blvd

Suite, Apt. #, Etc.

City

Tallahassee

State
FL

Zip Code

32301-2960

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01/25/06--01/04--023 **908 75

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

Jimmy [Signature]

REGISTERED AGENT MUST SIGN

Date Jan. 6, 2006

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
	See Attached Listing		

REINSTATEMENT 04-05

Roberts JAN 12 2006

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: *Mark Rosen* Mark Rosen 01/04/2006 8100284-1300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

13 2 12

Darwin National Assurance Company

Board of Directors

Stephen J. Sills (Chairman)	Chairman of the Board
Dorothea Gilliam	Director
James J. McIntyre	Director
John L. Sennott, Jr.	Director
James P. Slattery	Director

Business Address

9 Farm Springs Road, Farmington, CT 06032
40 East Hinsdale Avenue, Suite 201, Hinsdale, IL 60521
1600 Aspen Commons, Middleton, WI 53562
9 Farm Springs Road, Farmington, CT 06032
7 Times Square, 14th Floor, New York, NY 10036

Officers of the Corporation

Stephen J. Sills	President
Mark I. Rosen	Secretary
John L. Sennott, Jr.	Chief Financial Officer and Treasurer
Dorothea Gilliam	Vice President
Roger P. Gorham	Vice President

Business Address

9 Farm Springs Road, Farmington, CT 06032
9 Farm Springs Road, Farmington, CT 06032
9 Farm Springs Road, Farmington, CT 06032
40 East Hinsdale Avenue, Suite 201, Hinsdale, IL 60521
7 Times Square, 14th Floor, New York, NY 10036