


2006 FOR PROFIT CORPORATION REINSTATEMENT

SECRETARY
DIVISION OF
06 OCT 13 AM 9:12

DOCUMENT # 858321		
Entity Name FAIRMONT INSURANCE COMPANY		

Principal Place of Business 10777 WESTHEIMER RD STE 5 SOUTH HOUSTON, TX 77042 US	Mailing Address 10777 WESTHEIMER RD STE 5 SOUTH HOUSTON, TX 77042 US
---	---

2. Principal Place of Business 10777 Westheimer Road Suite, Apt. #, etc. Ste 5 South	3. Mailing Address 250 Commercial Street Suite, Apt. #, etc. Suite 5000
City & State Houston, TX	City & State Manchester, NH
Zip 77042	Country US

REINSTATEMENT 06



10102006 REIN-P CR2E098 (11/05)

4. FEI Number 94-1737938	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
---	--

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$750.00
After January 1, 2007, Fee will be \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ADEE, MARC J 10777 WESTHEIMER RD STE 5 SOUTH HOUSTON, TX 77042 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500081185515 10/25/06--01032--017 ***750.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MUNDY, PAUL 10777 WESTHEIMER RD STE 5 SOUTH HOUSTON, TX 77042 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T, D, CFO, SVP MICHAEL J. SLUKA 250 COMMERCIAL STREET, SUITE 5000 MANCHESTER, NH 03101 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, NICOLE 10777 WESTHEIMER RD STE 5 SOUTH HOUSTON, TX 77042 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, CHAIRMAN, CEO WILLIAM J. GILLET 250 COMMERCIAL STREET, SUITE 5000 MANCHESTER, NH 03101 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GOLDBOLD, LOYD 10777 WESTHEIMER RD STE 5 SOUTH HOUSTON, TX 77042 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, GC, SVP JOHN M. PARKER 250 COMMERCIAL STREET, SUITE 5000 MANCHESTER, NH 03101 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCCOLLUM, EILEEN 10777 WESTHEIMER RD STE 5 SOUTH HOUSTON, TX 77042 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASST S EILEEN MCCOLLUM 10777 WESTHEIMER ROAD STE 5 SOUTH HOUSTON, TX 77042 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HUSKY, SHARLENE 10777 WESTHEIMER RD STE 5 SOUTH HOUSTON, TX 77042 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAVID OSTROWSKI 250 COMMERCIAL STREET, SUITE 5000 MANCHESTER, NH 03101 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  JOHN M. PARKER, D, GC & SRVP 603-656-2264

Fairmont Insurance Company – Document #858321
Attachment #1 to Item 10

Title: D
Name: Robert L. Gossett
Address: 250 Commercial Street, Suite 5000
Manchester, NH 03101

Title: Exec VP
Name: Richard J. Klimaszewski
Address: 10777 Westheimer Road Suite 5 South
Houston, TX 77042

Title: Sr. VP
Name: Frank DeMaria
Address: 250 Commercial Street, Suite 5000
Manchester, NH 03101

Title: Sr. VP, S, Chief Actuary
Name: Christopher S. Throckmorton
Address: 5205 N. O'Connor Boulevard
Irving, TX 75039

Title: AS
Name: Adeline Haft
Address: 5205 N. O'Connor Boulevard
Irving, TX 75039

Title: AVP/Controller
Name: Joseph Zampella
Address: 250 Commercial Street, Suite 5000
Manchester, NH 03101

Title: ASST VP
Name: Michael P. Ziemer
Address: 10777 Westheimer Road Ste 5 South
Houston, TX 77042

Title: AS
Name: Erica Arnold
Address: Lakeside Office Center 1
2850 Lake Vista Drive, Suite 150
Lewisville, TX 75067

Fairmont Insurance Company – Document #858321
Attachment #1 to Item 10

Title:	AS
Name:	James C. Baker
Address:	Lakeside Office Center 1 2850 Lake Vista Drive, Suite 150 Lewisville, TX 75067
Title:	AS
Name:	John K. Cassil
Address:	Lakeside Office Center 1 2850 Lake Vista Drive, Suite 150 Lewisville, TX 75067
Title:	AS
Name:	Sherryl R. Scott
Address:	250 Commercial Street, Suite 5000 Manchester, NH 03101