

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

02 FEB -8 PM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F00000004814

1. Corporation Name

THE TERRA FINANCIAL COMPANIES, LTD., INC.

Principal Place of Business

Mailing Address

200 N. MARTINGALE ROAD, 7TH FLOOR
SCHAUMBURG IL 60173-2096

200 N. MARTINGALE ROAD, 7TH FLOOR
SCHAUMBURG IL 60173-2096



REINSTATEMENT 2001-2002

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/24/2000

5. FEI Number

36-3287737

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

\$0.75 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PCEO	REEDY, DAVID S	6610 WEST BROAD STREET	RICHMOND VA 23230
V	SAVAGE, BRIAN T	6610 WEST BROAD STREET	RICHMOND VA 23230
CFO	CASEY, THOMAS W	6610 WEST BROAD STREET	RICHMOND VA 23230
V	HEINRICH, MARCUS K	6610 WEST BROAD STREET	RICHMOND VA 23230
V	MINDEL, NORBERT M	6610 WEST BROAD STREET	RICHMOND VA 23230
T	MURPHY, DAVID R	6610 WEST BROAD STREET	RICHMOND VA 23230

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

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.

Signature of
Registered Agent

Signature
REGISTERED AGENT MUST SIGN

Date

2/7/02

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)(l), 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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2040 (8/01)



ACCOUNT NO. : 072100000032

REFERENCE : 424565 7192809

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : February 7, 2002

ORDER TIME : 1:03 PM

ORDER NO. : 424565-010

CUSTOMER NO: 7192809

CUSTOMER: Ms. Anita Matos
Ge Financial Assurance
6610 West Broad Street

Richmond, VA 23230

REINSTATEMENT

NAME: THE TERRA FINANCIAL COMPANIES
LTD., INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds EXT 1133
EXAMINER'S INITIALS _____

RECEIVED
02 FEB - 8 PM 2:53
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA