

# FD3000005214

Florida Department of State  
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From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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## FOREIGN PROFIT QUALIFICATION

Gramercy Insurance Company

Certificate of Status	0
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DIVISION OF CORPORATIONS

10-2102



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 20, 2003

CT CORPORATION SYSTEM

SUBJECT: GRAMERCY INSURANCE COMPANY  
REF: W03000030336

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Trevor Brumbley  
Document Specialist

FAX Aud. #: H03000299249  
Letter Number: 103A00056983

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STATE OF FLORIDA  
SECRETARY OF STATE  
FILING

AND  
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Gramercy Insurance Company  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Texas 3. 13-3002241  
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 11-1-79 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification."  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 3000 Quorum Dr., Ste. 111, Dallas, TX 75254  
(Principal office address)

5000 Quorum Dr., Ste. 111, Dallas, TX 75254  
(Current mailing address)

8. property & casualty insurance  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road,

Plantation, Florida 33324  
(City) (Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

C T Corporation System

By: Margaret E. Routzahn  
(Registered agent's signature)

MARGARET E. ROUTZAHN  
Special Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

SEE ATTACHED

A. DIRECTORS

Chairman: See Attached List

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: See Attached List

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. TOOD M. CAMPBELL

(Typed or printed name and capacity of person signing application)

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ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 08-11-2010 BY 60322  
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**GRAMERCY INSURANCE COMPANY**  
**OFFICERS AND DIRECTORS**  
**Florida Application for Admission**

William Kenneth York, Jr.  
Executive Vice President  
3110 Crossing Park Road, Norcross, GA 30071

Glen Howard Hammer  
Director  
3110 Crossing Park Road, Norcross, GA 30071

Hayden Scott Hammer  
Director  
3110 Crossing Park Road, Norcross, GA 30071

Douglas Granville Merriman  
Secretary  
3110 Crossing Park Road, Norcross, GA 30071

Joan Fried Hammer  
Director  
3110 Crossing Park Road, Norcross, GA 30071

Antonio Ronald Barner  
Director  
3120 Crossing Park road, Norcross, GA 30071

Todd Michael Campbell  
Treasurer / *President*  
3120 Crossing Park Road, Norcross, GA 30071



**Texas Department of Insurance**

Financial, Company Licensing & Registration, Mail Code 305-2C  
333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104

October 20, 2003

Ms. Dawn Cardenas  
CT Corporation System  
701 Brazos, Suite 360  
Austin, Texas 78701

RE: GRAMERCY INSURANCE COMPANY  
Dallas, Texas

Dear Ms. Cardenas:

Please be advised that the captioned company is currently licensed by Certificate of Authority No. 11872 dated May 20, 1998 to transact the business of insurance in the State of Texas. As of this date, said Certificate has not been canceled, suspended or revoked.

If we can be of further assistance, please feel free to call at 512/322-4214.

Sincerely,

Barbara Strahan  
Insurance Specialist  
Company Licensing & Registration - MC 305-2C

Enclosure

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SECRETARY OF STATE  
TALFORD, TEXAS

# Texas Department of Insurance



Certificate No. 11872

Company No. 07-093491

## Certificate of Authority

THIS IS TO CERTIFY THAT

GRAMERCY INSURANCE COMPANY

DALLAS, TEXAS

has complied with the laws of the State of Texas applicable thereto and is hereby authorized to transact the business of

Fire; Allied Coverages; Hail-growing crops only; Rain; Inland Marine; Ocean Marine; Aircraft--Liability & Physical Damage; Automobile--Liability & Physical Damage; Liability other than Automobile; Fidelity & Surety; Glass; Burglary & Theft; Forgery; Boiler & Machinery; Credit; Livestock and Reinsurance on all lines authorized to be written on a direct basis

insurance within the state of Texas. This Certificate of Authority shall be in full force and effect until it is revoked, canceled or suspended according to law.

IN TESTIMONY WHEREOF, witness my hand and seal of office at Austin, Texas, this

20th day of May A.D. 1998

ELTON BOMER  
COMMISSIONER OF INSURANCE

BY

  
Kathy A. Wilcox  
Director  
Insurer Services