

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

07 JUN 12 PM 3:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F04000000174

1. Corporation Name

Builders Insurance Company, Inc.

2. Principal Office Address - No P.O. Box #

5430 W. Sahara Avenue

Suite, Apt. #, etc.

City & State

Las Vegas, NV

Zip

89146

Country

USA

3. Mailing Office Address

5430 W. Sahara Avenue

Suite, Apt. #, etc.

City & State

Las Vegas, NV

Zip

89146

Country

USA

**REINSTATEMENT**

4. Date Incorporated or Qualified  
To Do Business in Florida

1/7/04

5. FEI Number  
88-0453140

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  
Michael T. Rogers

Street Address (P.O. Box Number is Not Acceptable)  
Risk Services, 1800 Second Street

Suite, Apt. # Etc  
Suite 909E

City  
Sarasota

State  
FL

Zip Code  
34236

☐ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

400104521224

06/18/07-01084-004 \$300.00

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

REGISTERED AGENT MUST SIGN

Date 5/30/07

**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
PD	G. Wayne Harris	1800 Second Street, Ste. 909E	Sarasota, FL 34236
CD	Kenneth Cox	3700 Meade Avenue	Las Vegas, NV 89102
VPD	Jerry Peck	3629 W. Hacienda Ave.	Las Vegas, NV 89118
VPD	Henry Sharp	4842 Berg Street	Las Vegas, NV 89102
VPD	Thomas Wheeler	P. O. Box 80987	Las Vegas, NV 89180

\*\*\* SEE ATTACHED FOR ADDITIONAL OFFICERS AND DIRECTORS\*\*\*

10. I certify that I am an officer 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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/30/07

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**FLORIDA DEPARTMENT OF STATE**  
**Corporation Reinstatement**

**Builders Insurance Company, Inc.**  
**Florida Document #F04000000174.**

**6/7/07**

**Additional Officers and Directors**

**Salvatore Gugino**  
**Director/Vice President and Secretary**

[REDACTED]  
Gugino Law Firm  
6970 O'Bannon Drive, Bldg. 2  
Las Vegas, NV 89117

**James Barnett**  
**Director/Vice President**

[REDACTED]  
3450 Meade Avenue  
Las Vegas, NV 89102

**Larry Long**  
**Director/Treasurer**

[REDACTED]  
4005 West Reno Avenue, #C  
Las Vegas, NV 89118

**Jack Schreiner**  
**Director/Vice President**

[REDACTED]  
3380 W. Sahara Ave., Ste. 120  
Las Vegas, NV 89102