

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 OCT 27 AM 8:31

SECRETARIAT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F04000006071

1. Corporation Name

Wellington F. Roemer Insurance, Inc.

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

3912 Sunforest Court

Suite, Apt. #, etc.

City & State

Toledo, OH

Zip

43623

Country

USA

3. Mailing Office Address

P.O. Box 8730

Suite, Apt. #, etc.

City & State

Toledo, OH

Zip

43623-0739

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 10/21/2004

5. FEI Number

34-4413018

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

NRAI Services, Inc.

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

2731 Executive Park Drive

Suite, Apt. #, Etc.

Suite 4

City

Weston

State

FL

Zip Code

33331

☒ 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.

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

Tanya Dietrich

REGISTERED AGENT MUST SIGN

Tanya Dietrich, Asst. Secy.

Date

10/24/08

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		

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 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:

Wellington F. Roemer, III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/24/08

Daytime Phone #

Wellington F. Roemer Insurance, Inc.
Officers and Directors

Directors:

Wellington F. Roemer III – Chairman	3912 Sunforest Court, Toledo, OH 43623
William T. Roemer – Vice Chairman of the Board	3912 Sunforest Court, Toledo, OH 43623
Wellington F. Roemer III – Director	3912 Sunforest Court, Toledo, OH 43623
Robert D. Schwartz – Director	3912 Sunforest Court, Toledo, OH 43623
Alexander H. Due – Director	3912 Sunforest Court, Toledo, OH 43623
Michael J. Lawrence – Director	3912 Sunforest Court, Toledo, OH 43623

Officers:

Wellington F. Roemer III – President and CEO	3912 Sunforest Court, Toledo, OH 43623
William T. Roemer – Exec. VP and Secretary	3912 Sunforest Court, Toledo, OH 43623
Robert D. Schwartz – Executive Vice President	3912 Sunforest Court, Toledo, OH 43623
Alexander H. Due – Executive Vice President	3912 Sunforest Court, Toledo, OH 43623
Deborah L. Gomez – Senior Vice President	3912 Sunforest Court, Toledo, OH 43623
Michael J. Lawrence – VP	3912 Sunforest Court, Toledo, OH 43623
Robert J. Rajner – VP	3912 Sunforest Court, Toledo, OH 43623
Kenneth C. Roemer – VP	3912 Sunforest Court, Toledo, OH 43623
Dane M. Vollmar – Treasurer/CFO	3912 Sunforest Court, Toledo, OH 43623