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| (| Requesto | r's Name) | |
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| (| (Address) | | |
| | Address) | | |
| | City/State | :/Zip/Phone# |) |
| PICK-UP | | WAIT | MAIL MAIL |
| (| Business | Entity Name |) |
| (| Documen | t Number) | |
| Certified Copies | | Certificates o | f Status |
| Special Instructions | to Filing (| Officer: | |
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| ocument xaminer | DCC | | |
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Carl

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TRANSMITTAL LETTER

| _ | ion of Corp | | | | | |
|---|---------------|------------------------------|--------------------------|---|---|--------------------|
| SUBJECT: | First Non | orofit Insurance | e Company | | | |
| | | | | tion - must include suffix | () | |
| Dear Sir or Ma | adam: | | | | | |
| | f Existence | " and check a | | or Authorization to Trans o register the above refer | | |
| Please return a | all correspo | ndence conce | rning this mat | ter to the following: | | |
| Richard J. Dae | сеу | | | | | |
| | | | (Name | of Person) | | |
| First Nonprofit | t Insurance | Company | | | | |
| | <u> </u> | | (Firm/C | Company) | | |
| 111 N. Canal | St. #801 | | | | | |
| | | | (Ac | idress) | | |
| Chicago, IL 60 | 0606 | | | | | |
| | | | (City/Stat | e and Zip code) | ····· | |
| | | | | | | |
| For further inf | formation c | oncerning this | matter, please | e call: | | |
| | | | | | | : ~. ? : |
| Richard J. Dad | сеу | | _ at (<u>312</u> |) 627-7711 | | esta V |
| (Nam | ie of Persoi | n) | (Are | a Code & Daytime Telep | hone Number) | ·* · |
| | EET ADDI | | | MAILING A | , | |
| Registration Section Division of Corporations | | Registration | Section Corporations | Ē | | |
| | . Gaines St | | | P.O. Box 63 | | E |
| Tallah | nassee, FL | 32399 | | Tallahassee, | FL 32314 | |
| Enclosed is a | check for the | he following a | mount: | | | |
| □ \$70.00 Fili | ng Fee | ☐ \$78.75 Fil. Certificat | ing Fee & e of Status | ☐ \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Certificate of Certified Cop | f Status & |



a member of First Nonprofit Mutual Group

January 7, 2005

Ms. Diane Cushing, Document Specialist Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Subject:

First Nonprofit Insurance Company

Letter Number: 604A00054543

Dear Diane,

Attached is a Certificate of Compliance from the Illinois Insurance Department as requested in your letter of September 13, 2004. We will be filing our application for licensing as an insurer in Florida next week.

If there are any questions, please contact me at 312-627-7711.

Sincerely,

Richard J. Dacey, Vice President/CFO



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 13, 2004

RICHARD J. DACEY FIRST NONPROFIT INSURANCE COMPANY 111 N CANAL ST., #801 CHICAGO, IL 60606

SUBJECT: FIRST NONPROFIT INSURANCE COMPANY

Ref. Number: W04000034118

We have received your document for FIRST NONPROFIT INSURANCE COMPANY and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Document Specialist

Letter Number: 604A00054543

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.

| · | Insurance Company | | | ^^*** | _ |
|----------------|--|------------|-------------------------------------|---------------------------|------------|
| | corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.") | IED," • | COMPANY," "CORPORATIO | ON," | |
| , | | | | | |
| First Insuranc | e Company for Nonprofits | | | | |
| | lable in Florida, enter alternate corporate n | name ad | opted for the purpose of transac | ting business in Florida) | - |
| Illinois | | 3. 36 | 3-3877576 | | |
| | under the law of which it is incorporated) | | (FEI number, if ap | oplicable) | _ |
| July 1, 1978 | | 5. P | erpetual | | _ |
| (Dat | e of incorporation) | (1 | Duration: Year corp. will cease | to exist or "perpetual") | _ |
| Will be applyi | ng in next 30 days. | | | | _ |
| | (Date first transacted busin (SEE SECTIONS 607.1501 & 60 | | lorida, if prior to registration) | :::+:/ | |
| | | 07.1302 | , r.s., to determine penalty had | mity) | |
| 111 N. Canal S | st. #801, Chicago, IL 60606 (Principal office | a addrac | | | - |
| | • | audies | 5) | | |
| 111 N. Canal S | St. #801, Chicago, IL 60606 (Current mailing | r addres | c) | | - |
| | (Current maring | 5 ddd; cs. | <i>s,</i> | | |
| Property/Casu | alty Insurer | | | | |
| | s) of corporation authorized in home state | or coun | try to be carried out in state of F | Florida) | - |
| Name and stre | et address of Florida registered agent: | (P.O. E | Box NOT acceptable) | | |
| | Phillip Merriman | ` | | Table Comp | |
| Name: | Fillip Menman | | | | • • • |
| ffice Address: | 1335 Saxony Circle - Apt. 315 | | | | , * . , |
| | Punta Gorda 33983 | | , Florida | | |
| | (City) | | (Zip code) | £. | |
| | gent's acceptance: | | | | ÷ . |
| 0 10 1 | | | | | |

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:

A. DIRECTORS Chairman: Address: SEE ATTACHED Vice Chairman: Address: ___ Director: Address: __ Director: Address: __ **B. OFFICERS** President: SEE ATTACHED Address: _____ Vice President: Address: Secretary: Address: ______ Address: ______ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)

FIRST NONPROFIT INSURANCE COMPANY

BOARD OF DIRECTORS

Since 1980

CHAIRMAN

Michael Tarnoff
Senior Vice President of
Administration and Finance
Jewish Federation of Metro Chicago
1 South Franklin Street – 6th Floor
Chicago, IL 60611

PHONE: 312/444-2803 FAX: 312/444-2086

VICE CHAIRMAN

Robert Klaus President & CEO Oral Health of America 410 North Michigan – Suite 352 Chicago, IL 60611 PHONE: 312/836-9900 FAX 312/836-9986 Since 8/1988 1980-1988 Executive Director IL Humanities Council

VICE CHAIRMAN

Delbert W. Arsenault 910 S. Michigan, Unit 715 Chicago, IL 60607 PHONE: 312/427-0177

FAX: None

Since 1979

VICE CHAIRMAN

Harry Tankus #11 A Landmark Northfield, IL 60093 PHONE: 847/501-4337

FAX: None

Since 1965 Chairman, Retired Crane Packing Company

BOARD MEMBERS (CONTINUED)

Jim W. Croft Vice President of Finance Field Museum

Roosevelt Road & Lake Shore Drive

Chicago, IL 60605 PHONE: 312/665-7240 FAX: 312/665-7216

Ronald Dukes

President

Ronald Dukes Associates, LLC 20 N. Wacker Drive, Suite 2010

Chicago, IL 60606 PHONE: 312/357-2895 FAX: 312/357-2897

Richard M. King

President

Kittleman & Associates, LLC

300 S. Wacker Drive Chicago, IL 60606

PHONE: 312/986-1166

FAX: 312/986-0895

Joseph Geiger

Executive Director

Pennsylvania Association of

Nonprofits Organizations

800 Corporate Circle, Suite 201

Harrisburg, PA 17110

PHONE: 717/236-8584

FAX: 717/236-8767

Since 1984

Since 1980

Since 2002

Since 1985

Trinita Logue President The Illinois Facilities Fund 300 West Adams Street

Chicago, IL 60606

PHONE: 312/596-5117 FAX: 312/629-0065

Since 10/1990

5/1987-9/1990 Assistant Director

Chicago Community Trust

BOARD MEMBERS (CONTINUED)

Phillip A. Merriman

1335 Saxony Circle - Apt. 315

Punta Gorda, FL 33983 PHONE: 217/386-2243

FAX: None

Christopher W. Nugent

Marsh Advantage America

500 W. Monroe St., Suite 3810

Chicago, IL 60601

PHONE: 312/683-7019

FAX: 312/683-7045

Barbara Stankus

11412 Enterprise Drive

Westchester, IL 60154 PHONE: 708/531-1946

FAX: None

Daniel Doucette

President/CEO

Milwaukee Insurance Company

250 N. Sunny Slope Road, Suite 250

Brookfield, WI 53005

PHONE: 262/938-0046, x22

FAX: 262/938-0053

Philip R. Warth, Jr.

President and Chief Executive Officer

First Nonprofit Mutual Insurance Company

111 North Canal Street, Suite 801

Chicago, IL 60606

PHONE: 312/627-7710

FAX: 312/930-0375

Since 1967

President, Retired

United Way of Suburban Chicago

Since 1986

Since 1994

Since 2003

1985-12/1991 President & CEO Second Harvest Natl. Food Bank

FIRST NONPROFIT INSURANCE COMPANY

OFFICERS

PRESIDENT & CHIEF EXECUTIVE OFFICER

Philip R. Warth, Jr.

Since 1992

1985-12/1991 President & CEO Second Harvest Natl. Food Bank

EXECUTIVE VICE PRESIDENT

Ronald R. Boggs

Since 10/1989

1981-1989 Consultant The Wyatt Company

SENIOR VICE PRESIDENT OF UNDERWRITING

Marianne Tadish

Since 11/1993 (New Officer – 2002)

1977-1993 Underwriting Manager

Fireman's Fund

VICE PRESIDENT, SECRETARY, TREASURER & CHIEF FINANCIAL OFFICER

Richard J. Dacey

Since 5/1994

6/1993-5/1994 Controller

Hinz Prog. Mgrs.

1972-6/1993 Secy. & Treasurer

The Mill Mutuals



Department of Financial and Professional Regulation Division of Insurance

WHEREAS, the First Nonprofit Insurance Company located at Chicago in the State of Illinois was incorporated pursuant to the provisions of the "Illinois Insurance Code" applicable to said Company:

NOW, THEREFORE, I the undersigned, Director of Insurance of the State of Illinois, do hereby certify the said Company is authorized to transact its appropriate business as set forth under Clause(s)

(a), (b), (c), (d), (e), (f), (g), (h), (i), (j), (k), (l) of Class 2 (a), (b), (c), (d), (e), (f), (g), (h), (i) of Class 3

of Section 4 of the "Illinois Insurance Code" in this State, in accordance with the laws thereof.

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION of the State of Illinois; FERNANDO E. GRILLO, SECRETARY

DATE: January 6, 2005

DIVISION OF INSURANCE

DEIRDRE K. MANNA Acting Director of Insurance