

F06000003578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

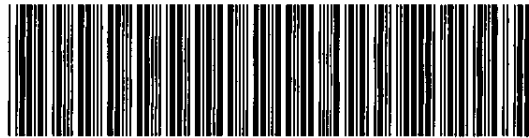
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EBurch MAY 19 2006

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Zions Insurance Agency, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Hailey Overby

(Name of Person)

Kennedy Licensing Service, Inc.

(Firm/Company)

2501 Thomas Ave.

(Address)

Dallas, TX 75201

(City/State and Zip code)

For further information concerning this matter, please call:

Hailey Overby

(Name of Person)

at (214) 855-0737

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☒ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**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. Zions Insurance Agency, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. UT

(State or country under the law of which it is incorporated)

3. 87-0445961

(FEI number, if applicable)

4. 05/12/87

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4141 S. Highland Drive Salt Lake City UT 84124

(Principal office address)

(Current mailing address)

8. Nonresident Insurance Agency Sales & Service

(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 NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida 32301

(Zip code)

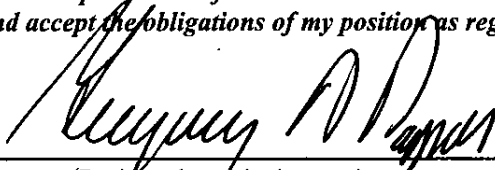
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10. **Registered agent's acceptance:**

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.



(Registered agent's signature)

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: See Attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached

Address: _____

Vice President: _____

Address: _____

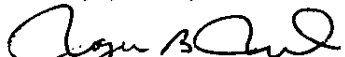
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Roger Ricks, COO
(Typed or printed name and capacity of person signing application)

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Zions Insurance Agency, Inc.

Officers & Directors

First	Middle	Last	Title	Resident Street	City	St	Zip	Business Street	City	St	Zip	DOB
A	Scott	Anderson	President	1326 East Ave	Salt Lake City	UT	84103	One South Main	Salt Lake City	UT	84111	11/16/1946
Diana	E	Kirk	Exec VP	3358 Meadows Dr	Park City	UT	84060	310 S Main #1330	Salt Lake City	UT	84111	6/16/1951
Randy	L	Gruninger	Exec VP	189 W Baer Cr Dr	Kaysville	UT	84037	4141 S Highland	Salt Lake City	UT	84124	4/11/1956
Norman	D	Squires	Exec VP	11267 S Palisade View Dr	So Jordan	UT	84095	4141 S Highland	Salt Lake City	UT	84124	2/15/1936
Roger	B	Ricks	COO	9731 Laura Ln	Sandy	UT	84092	4141 S Highland	Salt Lake City	UT	84124	12/14/1942
Patricia	A	Dennis	VP	9249 S Falcon Park Cir	Sandy	UT	84093	One South Main	Salt Lake City	UT	84111	7/28/1961
Dennis	L	Dunbar	Sec/Treas	3119 S 2000 E	Salt Lake City	UT	84109	4141 S Highland	Salt Lake City	UT	84124	7/30/1954
Steve	L	Neidig	VP	7168 South 2740 East	Salt Lake City	UT	84121	4141 S Highland	Salt Lake City	UT	84124	4/11/1945
Darin		Jarrett	VP	2413 Nathanael Way	West Jordan	UT	84088	4141 S Highland	Salt Lake City	UT	84124	4/19/1975
Susan	R	Madsen	Asst VP	7054 South Village Court	Midvale	UT	84047	4141 S Highland	Salt Lake City	UT	84124	2/5/1948
<hr/>												
Bruce	K	Alexander	Director	5367 E Oxford Ave	Englewood	CO	80110	2000 S Colorado Blvd #2	Denver	CO	80222	4/10/4439
A	Scott	Anderson	Chairman	1326 East Ave	Salt Lake City	UT	84103	One South Main	Salt Lake City	UT	84111	11/16/1946
James	R	Cooper	Director	830 East 750 North	Bountiful	UT	84010	One South Main	Salt Lake City	UT	84111	7/5/1960
Kay	B	Hall	Director	142 North Kays Dr	Kaysville	UT	84037	One South Main	Salt Lake City	UT	84111	9/8/1965
W	David	Hemingway	Director	84 Ricks Creek Way	Centerville	UT	84104	One South Main	Salt Lake City	UT	84111	4/28/1947
George	B	Hofmann	Director	2532 Barcelona Dr	Sandy	UT	84093	One South Main	Salt Lake City	UT	84111	9/27/1949
Diana	E	Kirk	Director	3358 Meadows Dr	Park City	UT	84060	310 S Main #1330	Salt Lake City	UT	84111	6/16/1951
William	E	Martin	Director	2336 Villandry Ct	Henderson	NV	89074	750 E Warm Springs Rd	Las Vegas	NV	89119	11/11/1941
Harris	H	Simmons	Director	21 E Dorchester	Salt Lake City	UT	84103	One South Main	Salt Lake City	UT	84111	6/25/1954
David	J	Taylor	Director	3576 Sundridge Dr	Park City	UT	84098	One South Main	Salt Lake City	UT	84111	9/28/1958
Richard	G	Taylor	Director	2755 Wanda Way	Salt Lake City	UT	84117	None	Salt Lake City	UT	84111	2/25/1932

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TALLAHASSEE, FLORIDA

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**Utah Department of Commerce
Division of Corporations & Commercial Code**

160 East 300 South, 2nd Floor, PO Box 146105

Salt Lake City, UT 84114-6705

Service Center: (801) 530-4849

Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: <http://www.commerce.utah.gov>

04/29/2006

966172-014204292006-457578

CERTIFICATE OF EXISTENCE

Registration Number: 966172-0142
Business Name: ZIONS INSURANCE AGENCY, INC.
Registered Date: May 12, 1987
Entity Type: Corporation
Current Status: Good Standing

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The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division; and, that Articles of Dissolution have not been filed.



Kathy Berg

Kathy Berg
Director
Division of Corporations and Commercial Code