

F07000002954

Division of Corporations

Page 1 of 1

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H07000151076 3))



H070001510763ABC.

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 205-0381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5926

07 JUN - 6 PM 2:47

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**FOREIGN PROFIT/NONPROFIT CORPORATION**

Coverage Consultants, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>


6/7/07

**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. Coverage Consultants, 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. New York 3. 13-1486260  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12-14-1933 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. None  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 80 Route 4 East, Paramus, NJ 07652  
(Principal office address)  
80 Route 4 East, Paramus, NJ 07652  
(Current mailing address)
8. Insurance Broker/Agent  
(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: CT Corporation System  
Office Address: 1200 South Pine Island Rd.  
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.*  

**Arlene Bernal**  
**Vice President**

  
(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.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 JUN -6 PM 2:47

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

A. DIRECTORS

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

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

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

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

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

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

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

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

B. OFFICERS

President: James P Cullinan

Address: 590 Grist Trail

Paramus, NJ 07652

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

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

Secretary: Laura Cullinan

Address: 27 Columbus Ave., Hillsdale, NJ 07642

Treasurer: Thomas Cullinan

Address: 44 Eagle Rim Road, Upper Saddle River, NJ 07458

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

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

14. James P Cullinan, President

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 JUN - 6 PM 2:47

**State of New York  
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of **COVERAGE CONSULTANTS, INC.** was filed on 12/14/1933, under the name of **HUGH E. WOODWARD AND ASSOCIATES, INC.**, fixing the duration as perpetual, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment **HUGH E. WOODWARD AND ASSOCIATES, INC.**, changing its name to **COVERAGE CONSULTANTS, INC.**, was filed 03/16/1962.



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 04th day of June  
two thousand and seven.*

Daniel Shapiro  
Special Deputy Secretary of State

200706050361 \* R2

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 JUN -6 PM 2:47