

F070000005199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

MRS  
10/22

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Total Program Management, 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)

3878 Oak Lawn Ave # 210

(Address)

Dallas, TX 75219

(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. **Total Program Management, 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**

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

3. **20-2707992**

(FEI number, if applicable)

4. **05/10/2005**

(Date of incorporation)

5. **Perpetual**

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

6. **Upon Filing**

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **80 Orville Drive, Suite 100 Bohemia, NY 11716**

(Principal office address)

**same**

(Current mailing address)

8. **Nonresident Insurance Agency Sales & Services**

(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: **John D. Hatch, Esquire**

Office Address: **1267 Berkshire Lane, Suite 200**

**Tarpon Springs,**

(City)

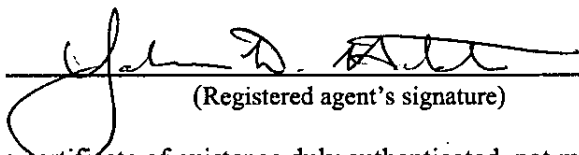
**Florida 34688**

(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: \_\_\_\_\_

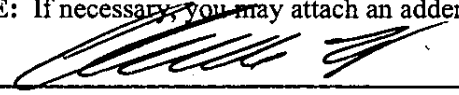
Secretary: \_\_\_\_\_

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. Christopher Foy, President  
(Typed or printed name and capacity of person signing application)

**TOTAL PROGRAM MANAGEMENT, INC.**  
**80 ORVILLE DRIVE, SUITE 100**  
**BOHEMIA, NEW YORK 11716**

**Stockholders, Officers & Directors**

**Christopher H. Foy**

President, Director and  
Stockholder (20%)

Home Address & Telephone:

6 Pia Court  
Holtville, NY 11742

Business Address & Telephone:

80 Orville Drive, Suite 100  
Bohemia, NY 11716

**William J. Van Beurden**

Chairman of the Board &  
Stockholder (40%)

Home Address & Telephone:

12950 N. Willow Bluff  
Clovis, CA 93619

Business Address & Telephone:

1600 Draper Street  
Kingsburg, CA 93631

**Steven C. Wigh**

Secretary

Home Address & Telephone:

12368 N. Via Tuscania  
Clovis, CA 93619

Business Address & Telephone:

4270 W. Richert, Suite 101  
Fresno, CA 93722

**Robert M. McIntosh**

Vice President, Director &  
Stockholder (40%)

Home Address & Telephone:

1301 Brittany Cross Road  
Santa Ana, CA 92705

Business Address & Telephone:

515 N. Cabrillo Park Dr., Suite 306  
Santa Ana, CA 92701

**Laura M. Cullen**

Chief Financial Officer

Home Address & Telephone:

824 E. Normal Avenue  
Fresno, CA 93704

Business Address & Telephone:

4270 W. Richert, Suite 101  
Fresno, CA 93722

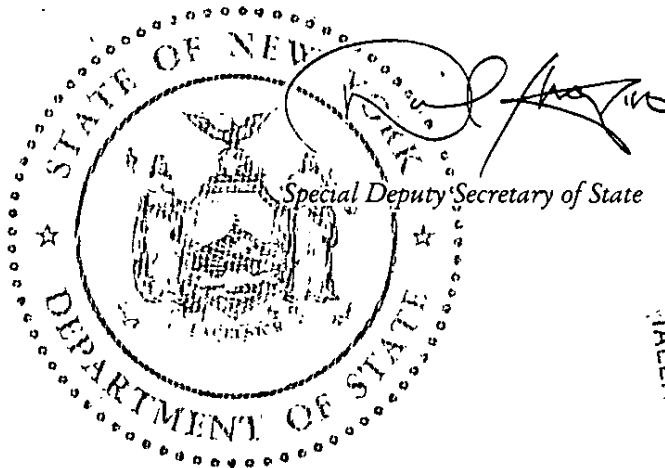
SEP 20 2007

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

I hereby certify, that the Certificate of Incorporation of TOTAL PROGRAM MANAGEMENT, INC. was filed on 05/10/2005, with perpetual duration, 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.

\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 29th day of August two  
thousand and seven.*



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