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4/15/08

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**COVER LETTER**

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

**SUBJECT:** Endurance Reinsurance Corporation of America  
(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:

Meredith Snowden  
(Name of Person)  
Pennington Law Firm  
(Firm/Company)  
215 S. Monroe St., 2<sup>nd</sup> Floor  
(Address)  
Tallahassee, FL 32301  
(City/State and Zip code)

For further information concerning this matter, please call:

Meredith Snowden at (850) 222-3533  
(Name of Person) (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. Endurance Reinsurance Corporation of America**

(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. Delaware**

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

**3. 35-2293075**

(FEI number, if applicable)

**4. 09-05-2002**

(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. 333 Westchester Avenue, White Plains, NY 10604**

(Principal office address)

**333 Westchester Avenue, White Plains, NY 10604**

(Current mailing address)

**8. Property and Casualty Insurance and Reinsurance**

(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: Thomas E. Gibbs, Esq. c/o Dewey & LeBoeuf LLP

Office Address: 50 North Laura Street, Suite 2800

Jacksonville, Florida 32202-3650

(City)

(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:

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**A. DIRECTORS**

Chairman: See attached list.

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

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

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

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

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

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

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

**B. OFFICERS**

President: See attached list.

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. Emily Canelo, Executive Vice President, Secretary & General Counsel

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

# Directors and Officers of Endurance Reinsurance Corporation of America

<u>Name</u>	<u>Position</u>	<u>Business Address</u>
William Ronald Babcock	Director	333 Westchester Avenue White Plains, NY 10604
Thomas David Bell	Director	90 Pitts Bay Road Pembroke HM08, Bermuda
Emily A. Canelo	Director, EVP, Secretary, General Counsel	333 Westchester Avenue White Plains, NY 10604
David Somers Cash	Director	90 Pitts Bay Road Pembroke HM08, Bermuda
Joan Maria deLemps	Director, EVP, Chief Casualty Officer	333 Westchester Avenue White Plains, NY 10604
James Gerard D'Onofrio	Director, SVP, Casualty Manager	333 Westchester Avenue White Plains, NY 10604
Steven Kenneth Dresner	Director, SVP, Manager, Workers' Compensation	333 Westchester Avenue White Plains, NY 10604
William Manning Jewett	Director and President	333 Westchester Avenue White Plains, NY 10604
Edward Thomas Kenney Jr.	Director, SVP, Property Manager	333 Westchester Avenue White Plains, NY 10604
Kenneth John LeStrange	Chairman of the Board of Directors	90 Pitts Bay Road Pembroke HM08, Bermuda
Thomas Paul Asquino	Director, EVP, Chief Property Officer	230 Park Avenue New York, New York 10169
Laura Ann Shanahan	Director, SVP and Manager, Surety and Personal Accident Dept.	333 Westchester Avenue White Plains, NY 10604
Michael E. Angelina	Director	90 Pitts Bay Road Pembroke HM08, Bermuda
Michael J. McGuire	Director	90 Pitts Bay Road Pembroke HM08, Bermuda
Roger Harry Heckman	Director, SVP, Agricultural Reinsurance	25 Ceramica Rancho Santa Margarita, California 92688

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<u>Business Address</u>	
<u>Name</u>	<u>Position</u>
Katherine Ann Mason	Chief Financial Officer

# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ENDURANCE REINSURANCE CORPORATION OF AMERICA" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF APRIL, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENDURANCE REINSURANCE CORPORATION OF AMERICA" WAS INCORPORATED ON THE FIFTEENTH DAY OF MARCH, A.D. 2007.

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You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6514975

DATE: 04-10-08