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Florida Department of State  
Division of Corporations  
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TALLAHASSEE, FLORIDA**FOREIGN PROFIT/NONPROFIT CORPORATION****Maguire Insurance Agency, Inc.**

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T. Burch FEB 6 2009

**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. Maguire 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. Pennsylvania

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

3. 23-1609281

(FEI number, if applicable)

4. April 16, 1962

(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. One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

(Principal office address)

One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

(Current mailing address)

8. Insurance Agency

(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: Chief Financial Officer

Office Address: PO Box 6200 (32314-6200) 200 E. Gaines St.

Tallahassee

(City)

, Florida 32399

(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.*

Chief Financial Officer

By: \_\_\_\_\_  
(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.

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

A. DIRECTORS

Chairman: James J. Maguire

Address: One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

Vice Chairman: None

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

Director: James J. Maguire, Jr.

Address: One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

Director: Sean S. Sweeney

Address: One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

B. OFFICERS

President: James J. Maguire, Jr.

Address: One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

Vice President: Sean S. Sweeney

Address: One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

Secretary: Craig P. Keller

Address: One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

Treasurer: Craig P. Keller

Address: One Bala Plaza, Suite 100, Bala Cynwyd, PA 19004

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

13.  2/4/07

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

14. Sean S. Sweeney, Executive Vice President & Chief Marketing Officer

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

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

FEBRUARY 5, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

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2009 FEB -5 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I DO HEREBY CERTIFY THAT,

**MAGUIRE INSURANCE AGENCY, INC.**

is duly Incorporated under the laws of the Commonwealth of Pennsylvania and  
remains a subsisting corporation so far as the records of this office show, as of  
the date herein.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's Office to  
be affixed, the day and year above  
written.

*Pedro A. Cantis*

Secretary of the Commonwealth