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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

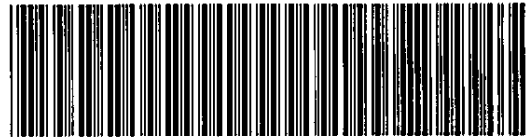
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA



Reinhart Boerner Van Deuren s.c.  
P.O. Box 2018  
Madison, WI 53701-2018

22 East Mifflin Street  
Suite 600  
Madison, WI 53703

Telephone: 608-229-2200  
Facsimile: 608-229-2100  
Toll Free: 800-728-6239  
reinhartlaw.com

November 14, 2011

Todd W. Martin, Esq.  
Direct Dial: 608-229-2244  
tmartin@reinhartlaw.com

DELIVERED BY COURIER

Ms. Karen Beyer  
Florida Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Dear Ms. Beyer:

Re: GBU Financial Life

Enclosed is an Application for Authorization for GBU Financial Life, a Pennsylvania fraternal benefit society. I am forwarding the enclosed to your attention because I worked with you last August to register another fraternal benefit society (copy enclosed). As you will recall, the regulations for fraternal benefit societies preclude them from using corporate abbreviations.

Also enclosed is an original Certificate of Compliance issued by the Pennsylvania Insurance Department, and the Application filing fee. Please contact me if you need any further information or documentation to process this Application.

Thank you for your assistance.

Yours very truly,

Todd W. Martin

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Encs.

## COVER LETTER

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

**SUBJECT:** GBU Financial Life  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Good Standing" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Todd W. Martin, Esq.

Name of Person

Reinhart Boerner Van Deuren s.c.

Firm/Company

22 E. Mifflin Street, Suite 600

P.O. Box 2018

Address

Madison, WI 53701-2018

City/State and Zip Code

tmartin@reinhartlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy S. Carril

Name of Person

at ( 608 ) 229-2263

Area Code & Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

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

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

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TALLAHASSEE, FLORIDA

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**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:*

1. GBU Financial Life  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Pennsylvania 3. 25-0502660  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 13, 1892 5. Perpetual  
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 4254 Clairton Boulevard, Pittsburgh, PA 15227-3394  
(Principal office address)
- 4254 Clairton Boulevard, Pittsburgh, PA 15227-3394  
(Current mailing address)

8. Financial Security and Fraternal Benefits for its Members  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: CT Corporation

Office Address: 1200 S. Pine Island Road

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.*

Rebecca Barth  
(Registered agent's signature)

Assistant Secretary  
Rebecca Barth

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 addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: See attached listing of Directors

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

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

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

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

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

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

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

**B. OFFICERS**

President: see attached listing of Officers

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

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

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

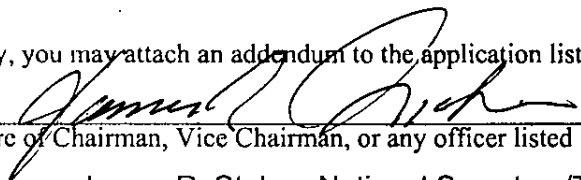
Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

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

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. James R. Stoker, National Secretary/Treasurer, CEO  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

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**GBU FINANCIAL LIFE  
CURRENT BOARD MEMBERS**

Lea Ann Hazi  
8776 Man-O-War Road  
Palm Beach Gardens, FL 33418  
Chairman of the Board

Ana E. Braun  
8274 Curry Ford Road  
Orlando, FL 32822

Donna L. Brophy  
5185 Elmwood Drive  
Pittsburgh, PA 15227

Barry E. Gorzelsky  
134 Harshberger Street  
Johnstown, PA 15905

Rosanne J. Penzien  
92 Lincoln Avenue  
Mt. Clemens, MI 48043

David L. Pringle  
276 Wansack Road  
West Middlesex, PA 16159

John B. Schmotzer  
4950 Parkvue Drive  
Pittsburgh, PA 15236

**GBU FINANCIAL LIFE  
OFFICERS**

Matthew M. Blistan, Jr.  
736 Hillside Drive  
Ligonier, PA 15658  
National Vice President

James R. Stoker  
9 East Club Drive  
Pittsburgh, PA 15236  
National Secretary/Treasurer, CEO

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**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

# Commonwealth of Pennsylvania



## INSURANCE DEPARTMENT

I, Michael Consedine, Insurance Commissioner of the Commonwealth of Pennsylvania, do hereby certify that **GBU FINANCIAL LIFE** located in Pittsburgh, Pennsylvania, is duly organized under the Laws of this Commonwealth and has complied with the requirements of the Act of July 17, 1935, P.L. 1092, and that it is registered with this Department and authorized to transact business as a fraternal benefit society.

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In Witness Whereof, I have hereunto set my hand  
and caused my official seal to be affixed this  
10<sup>th</sup> day of November, 2011

*Michael Consedine*

Michael Consedine  
Insurance Commissioner

