## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

1. Corporation Name

F93000005070

COLONIAL PENN MADISON INSURANCE COMPANY

2. Principal Office Address 3. Mailing Office Address 500 Virginia Drive 500 Virginia Drive Suite, Apt. #, etc. Suite, Apt. #, etc. ATTN: Legal Department City & State City & State

02 JUN 21 AM 9:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA

11/09/1993

4. Date incorporated or Qualified To Do Business in Florida

Fort Washington, PA			Fort Washir	Fort Washington, PA		<b>5.</b> FEI Number 13–1967524		Applied For	
Zip 19034		Country USA	Zip 19034	Country	· 6. CERTIFICATE OF STAT		\$8.75 Additio	Not Applicable  onal Fee require  icate of Status	
			7. Name a	nd Address of Current Reg	istered Agent				
	Name Insurance Commissioner								
	Street Address (P.O. Box Number is Not Acceptable) Capitol Building								
-	Suite, Apt. #, Etc.								
,	City	Tallahass	see		State FL	Zip Code	2399		
8. I, being a	ppointed th	ne registered agent of the a	bove named corporation, a	rm familiar with and accept the	he obligations of section 607.05	05 or 617. <b>0503</b> ,	F.S.		

	grature of spistered Agent Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  SUIDES 42908—  ****300.00 *****300.00 *****300.00  *****300.00 *****300.00				
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip		
	SEE ATTACHED				
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		·			
			·		

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/14/2002

605-7431

Daytime Phone #

## COLONIAL PENN MADISON INSURANCE COMPANY

## Attachment to State of Florida Uniform Business Report

Titles	Name of Officers and/or Directors	Steet Address of Each Officer and/or Director	City / State / Zip Fort Washington, PA 19034	
P/D	Brian Duffy	500 Virginia Drive		
C/D	Kathryn V. Marinello	200 N. Martingale Road	Schaumburg, IL 60173	
٧	David J. Beck	601 Union Street	Seattle, WA 98101	
V/D	Thomas W. Casey	6604 W. Broad Street	Richmond, VA 23230	
V/S	Glenn L. Joppa	200 N. Martingale Road	Schaumburg, IL 60173	
V	Michael S. Laming	6604 W. Broad Street	Richmond, VA 23230	
V	Victor C. Moses	601 Union Street	Seattle, WA 98101	
V	Stephen E. Randall	500 Virginia Drive	Fort Washington, PA 19034	
V/D_	Leon E. Roday 6604 W. Broad Street		Richmond, VA 23230	
<u> </u>	Deborah C. Towner	601 Union Street	Seattle, WA 98101	
<b>/</b>	Deborah Wolbramsky	500 Virginia Drive	Fort Washington, PA 19034	
<u> </u>	Natnael Bereket-Ab	500 Virginia Drive	Fort Washington, PA 19034	
V	Ward E. Bobitz	6604 W. Broad Street	Richmond, VA 23230	
<b>/</b>	Brenda Daglish	6604 W. Broad Street	Richmond, VA 23230	
/	Richard G. Fucci	6604 W. Broad Street	Richmond, VA 23230	
/	Gordon A. McDowall	500 Virginia Drive	Fort Washington, PA 19034	
/	Michael R. Schlessinger	6604 West Broad Street	Richmond, VA 23230	
<u>/</u>	Daniel J. Sheehan	601 Union Street	Seattle, WA 98101	
- 	Garry T. Prizzia 6604 W. Broad Street		Richmond, VA 23230	
)	Constance B. Foster	Saul, Ewing 2 North Second Street, 7th Floor	Harrisburg, PA 19701	
)	Andrew J. Larsen	700 Main Street	Lynchburg, VA 24504	
	Gregory J. Macfarlane	200 N. Martingale Road	Schaumburg, IL 60173	
	John P. McNiff	McNiff Longwood Investment Advisors 3 Radnor Corporate Center		
	Richard G. Turner	Commonwealth Risk Services One Logan Square, Suite 1550	Philadelphia, PA 19103	