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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000000254

1. Corporation Name

Executive Risk Indemnity Inc.

REINSTATEMENT RH

10-07

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
82 Hopemeadow Street		15 Mountain View RD.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
		Att: Pat Tomczyk	
City & State		City & State	
Simsbury, CT		Warren, NJ	
Zip	Country	Zip	Country
06070-0129	USA	07059	USA

4. Date Incorporated or Qualified To Do Business In Florida: 01/19/1994

5. FEI Number: 132912259 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: Chief Financial Officer

Street Address (P.O. Box Number is Not Acceptable): 200 E. Gaines St.

Suite, Apt. #, Etc.: PO Box 6200 (32314-6200)

City: Tallahassee | State: FL | Zip Code: 32399-0000

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Michael J. Mitchell Date: 10/16/07

REGISTERED AGENT MUST SIGN Assistant Secretary

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPCO	Robert C. Cox	3 Mountain View Rd.	Warren, NJ 07059
Director	James D. Bronner	15 Mountain View Rd.	Warren, NJ 07059
VPSD	Andrew W. Macon	15 Mountain View Rd.	Warren, NJ 07059
SVP	Sean M. Fitzpatrick	82 Hopemeadow St.	Simsbury, CT 06070
Dir	Terrence W. Cavanaugh	15 Mountain View Rd.	Warren, NJ 07059
DC	Thomas F. Motamed	15 Mountain View Rd.	Warren, NJ 07059

10. I certify that I am an officer or director of the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing 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 exception contained in Chapter 119, 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: W. Andrew Macon 10-12-07 (908)903-3841

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FLRIB - CT SYSTEM CT Systems Online

Florida Department of State

Division of Corporations
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CORPORATION REINSTATEMENT

EXECUTIVE RISK INDEMNITY INC.

Certificate of Status	0
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$150.00

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