

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

F95000004799

1. Corporation Name

IGIC Management Company

FILED
00 MAY -2 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

2. Principal Office Address

3645 Cortez Rd. W.

Suite, Apt. #, etc.

#150

City & State

Bradenton, FL

Zip

34210

Country

US

3. Mailing Office Address

3645 Cortez Rd. W

Suite, Apt. #, etc.

#150

City & State

Bradenton, FL

Zip

34210

Country

US

REINSTATEMENT 97-00

4. Date Incorporated or Qualified
To Do Business in Florida

1996

5. FEI Number

47-0778833

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Gary L. Pridgen

Street Address (P.O. Box Number is Not Acceptable)

4300 Lakeside Dr.

Suite, Apt. #, Etc.

#13

City

Jacksonville

100003284421-8
-06/12/00--01026-003
***1208.75 ***1208.75

State
FL

Zip Code

32210

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

[Handwritten signature of Gary L. Pridgen]

REGISTERED AGENT MUST SIGN

Date 4/30/2000

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
Pres/ CEO	Bernard L. Koyen	6101 34th Street W. Unit 25H	Bradenton, FL 34210
EVP/ CFO	Gary L. Pridgen	4300 Lakeside Drive #13	Jacksonville, FL 32210
VP/ Secy	Connie S. Koyen	6101 34th Street W. Unit 25H	Bradenton, FL 34210
Dir	Steven Jost	6535 South Dayton	Lakewood, CO 80111
Dir	Richard L. Muller	505 South 93rd Avenue	Omaha, NB 68114
Dir	Roger D. Skaer, D.D.S.	7210 Cedaridge Circle	Wichita, KS 67226

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 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 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:

[Handwritten signature of Gary L. Pridgen]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/2000 904 384-1204

Date

Daytime Phone #