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F96000000958

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

904-222-1092

CORPORATION(S) NAME

800001724208

-02/26/96--01076--002

\*\*\*\*\*78.75 \*\*\*\*\*78.75

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F.T. Agency, Inc.

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☐ Amendment

☐ Merger

☒ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Certified Copy

☐ Photo Copies

☐ Fictitious Name

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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. F.T. AGENCY, INC.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "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.)
2. OHIO  
(State or country under the law of which it is incorporated)
3. 31-1422427  
(FEI number, if applicable)
4. NOVEMBER 23, 1994  
(Date of Incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. ONE COMMERCE SQUARE, 2005 MARKET STREET  
PHILADELPHIA, PA 19103-3212  
(Current mailing address)
8. THE SALE OF ANNUITIES AND OTHER LIFE INSURANCE PRODUCTS.  
(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 or Mail Drop Box **NOT** acceptable)

Name: CT CORPORATION SYSTEM

Office Address: 1/2 CT CORPORATION SYSTEM, 1200 SOUTH PINE ISLAND ROAD  
PLANTATION, Florida, 33324  
(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.

C T CORPORATION SYSTEM

Frank T. Stephens  
(Registered agent's signature)

Frank T. Stephens - Asst. Vice Pres

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: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: WILLIAM T. SPONE, JR.

Address: ONE COMMERCE SQUARE, 2005 MARKET ST., PHILA. PA 19103-3212

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

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

Director: LAWRENCE E. DONATO

Address: ONE COMMERCE SQUARE, 2005 MARKET ST., PHILA. PA 19103-3212

Director: MORRIS L. MILLER, JR.

Address: ONE COMMERCE SQUARE, 2005 MARKET ST., PHILA. PA 19103-3212

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: MORRIS L. MILLER, JR.

Address: ONE COMMERCE SQ., 2005 MARKET ST.  
PHILADELPHIA, PA 19103-3212

Vice President: JOSEPH D. STRENK

Address: 400 WEST MARKET STREET  
LOUISVILLE, KY 40232

Secretary: ROBERT B. KAPLAN

Address: ONE COMMERCE SQ., 2005 MARKET ST.  
PHILADELPHIA, PA 19103-3212

Treasurer: ROBERT D. WILLIAMS

Address: ONE COMMERCE SQUARE, 2005 MARKET ST., PHILA PA 19103-3212

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

13. Robert B. Kaplan

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

14. ROBERT B. KAPLAN, SECRETARY

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

**UNITED STATES OF AMERICA,  
STATE OF OHIO,  
OFFICE OF THE SECRETARY OF STATE.**

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*I, Bob Taft, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations and Miscellaneous filings; that said records show F.T. AGENCY, INC., an Ohio corporation, Charter No. 886294, having its principal location in Cincinnati, County of Hamilton, was incorporated on November 23rd, 1994 and is currently in **GOOD STANDING** upon the records of this office.*



WITNESS my hand and official  
seal at Columbus, Ohio this  
12th day of February, A.D. 1996

*Bob Taft*

Bob Taft  
Secretary of State

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