

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 1052

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **F99000001717**

1. Corporation Name
ESSEX NATIONAL INSURANCE AGENCY, INC.

Principal Place of Business % ESSEX CORPORATION 825 THIRD AVE NEW YORK NY 10022	Mailing Address % ESSEX CORPORATION 825 THIRD AVE NEW YORK NY 10022
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FILED

02 DEC -5 PM 3:46

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



REINSTATEMENT

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida 03/31/1999	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 13-4048160	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
CCEO	CROWE, KEVIN E	825 THIRD AVE	NEW YORK NY 10022
D	CROWE, KEVIN E	825 THIRD AVE	NEW YORK NY 10022
P	NICHOLAS, FREDERICK S III	825 THIRD AVE	NEW YORK NY 10022
VS	ZYTKOWICZ, GREGORY G	825 THIRD AVE	NEW YORK NY 10022
V	STODDART, TIM	825 THIRD AVE	NEW YORK NY 10022
T	DAOUST, GEORGE	825 THIRD AVE	NEW YORK NY 10022

8. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.
 103 N. MERIDIAN STREET
 TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	State FL
Zip Code	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent *Cynthia A. Hich*
REGISTERED AGENT MUST SIGN
 Asst. Secretary

300009372573
 12/05/02--01025--018 **750.00
 Date **12-5-02**

11. 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: *John Cooney*
REGISTERED AGENT MUST SIGN
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **11/27/02** Daytime Phone # **201 251-2135**

CR2E040 (8/02)

20f2

Essex National Insurance Agency, Inc.
List of Officers & Directors

<i>Name</i>	<i>Address</i>	<i>Title</i>
Kevin E. Crowe	825 Third Avenue New York, NY 10022	Chief Executive Officer
Frederick S. Nicholas III	825 Third Avenue New York, NY 10022	President
Gregory G. Zytowicz	825 Third Avenue New York, NY 10022	Vice President -Secretary
Ella Sankisov	215 Gateway Road West Napa, CA 94558	Vice President / Treasurer / Controller
Timothy M. Stoddart	825 Third Avenue New York, NY 10022	Vice President
Craig C. McCulloch	215 Gateway Road West Napa, CA 94558	Vice President
John M. Cooney	215 Gateway Road West Napa, CA 94558	Vice President

Director

Kevin E. Crowe	825 Third Avenue New York, NY 10022	Director
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