PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 DEC -7 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04056

1. Corporation Name

USBI Co.

REINSTATEMENT 04-09

CR2E081 (11/09)

2. Principal Office Address - No P.O. Box #		3. Mailing Office Address	
17900 Beeline Highway		Same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Jupiter, Florida			
Zip	Country	Zip	Country
33458	USA		

4. Date Incorporated or Qualified To Do Business in Florida: March 9, 1984

5. FEI Number: 59-2425729 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Rd.

Suite, Apt. #, Etc.:

City: Plantation | State: FL | Zip Code: 33324

☐ 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 617.0505, F.S.

Signature of Registered Agent: [signature] SALVINA AMENTA-GRAY SPECIAL ASSISTANT SECRETARY 12/8/09

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Director	Christopher B. McDavid	6633 Canoga Avenue	Canoga Park, CA 91309
Director	Steven Bouley	17900 Beeline Highway	Jupiter, Florida 33458
	See Attachment A		

10. E-mail Address: stephen.swigart@pw.utc.com
(To be used for future annual report notification)

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. I further certify 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] Stephen B. Swigart 12/4/2009 860-565-5820
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR — Date — Daytime Phone #

FL016 - 11/1/2009 © CT System Online

DC 12/8

Florida
Attachment A
USBI Co.

Officers

Steven Bouley	President	17900 Beeline Highway, Jupiter, FL 33458
Robert R Cochran	Treasurer	17900 Beeline Highway, Jupiter, FL 33458
Christopher B. McDavid	Secretary	6633 Canoga Avenue, Canoga Park, CA 91309
Stephen B. Swigert	Assistant Secretary	400 Main Street East Hartford, CT 06108
Susan Brattebo	Assistant Secretary	17900 Beeline Highway, Jupiter, FL 33458
Despina A. Zoef	Assistant Secretary - Tax	1 Financial Plaza, Hartford, CT 06101
James R. Hebert	Assistant Secretary - Tax	10 Farm Springs Road, Farmington, CT 06032
Michael R. Woznyk	Assistant Secretary - Tax	10 Farm Springs Road, Farmington, CT 06032
Jeanne H. Dornstauder	Assistant Secretary - Tax	10 Farm Springs Road, Farmington, CT 06032
Paul A. Bousquet	Assistant Secretary - Tax	1 Financial Plaza, Hartford, CT 06101

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

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CORPORATION REINSTATEMENT
USBI CO.

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