

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

①

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 NOV -3 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P28086
1. Corporation Name
Jones, Hill & Mercer Employee Benefits, Inc.

Principal Place of Business Mailing Address
4150 International Plaza
Ft. Worth, TX 76109

REINSTATEMENT 99

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01/25/90	
City & State		City & State		5. FEI Number	
Zip		Country		65-0167355	
				Applied For	
				Not Applicable	
				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 (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
Pres.	James M. Pennington	4150 International Plaza	Ft. Worth, TX 76109
Secty	Judy N. Kelley	4150 International Plaza	Ft. Worth, TX 76109
Tres.	Christopher M. Sherlock	4150 International Plaza	Ft. Worth, TX 76109
Dir.	James F. Gallagher, Jr.	4150 International Plaza	Ft. Worth, TX 76109
Dir.	Bernard H. Mizel	50 California St., 24 fl.	S.F., CA 94111
Dir.	Thomas P. Cahill	4351 Latham St., Ste. 100	Riverside, CA 92501

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
		Name Corporation Service Company	
		Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street	
		Suite, Apt. #, Etc. Suite 105	
		City Tallahassee	State Zip Code FL 32301

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.
Signature of Registered Agent: Karen E. Wehner Karen E. Wehner, Assistant V.P. Date November 1, 1999
REGISTERED AGENT MUST SIGN

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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: Judy N. Kelley Judy N. Kelley 10/29/99 (415) 263-2161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Secretary Date Daytime Phone #

CR2E201 (12/98)

2



ACCOUNT NO. : 072100000032
REFERENCE : 450037 7139998
AUTHORIZATION :
COST LIMIT : \$758.15 *Patricia Pajoto*

ORDER DATE : November 1, 1999
ORDER TIME : 5:50 PM
ORDER NO. : 450037-025
CUSTOMER NO: 7139998
CUSTOMER: Ms. Linda Hart
Usi Holdings, Inc.
50 California St.
24th Floor
San Francisco, CA 94111

ANNUAL REPORT FILING

NAME: JONES, HILL & MERCER
EMPLOYEE BENEFITS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

EXAMINER'S INITIALS:

RECEIVED
99 NOV -3 AM 8:52
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA