

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

pg 1 of 2

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

00 OCT 30 PM 2: 26

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

4150 INTERNATIONAL PLAZA  
FT. WORTH TX 76109

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

USI Insurance Services  
50 California St #24  
San Francisco, CA  
94111 USA

4. Date Incorporated or Qualified  
To Do Business in Florida

02/13/1990

SP

5. FEI Number

65-0167355

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$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
P	PENNINGTON, JAMES M	4150 INTERNATIONAL PLAZA	FT. WORTH TX 76109
S	KELLEY, JUDY N	4150 INTERNATIONAL PLAZA	FT. WORTH TX 76109
T	SHERLOCK, CHRISTOPHER M	4150 INTERNATIONAL PLAZA	FT. WORTH TX 76109
D	GALLAGHER, JAMES F JR.	4150 INTERNATIONAL PLAZA	FT. WORTH TX 76109
D	MIZEL, BERNARD H	50 CALIFORNIA STREET, 24 FLOOR	SAN FRANCISCO CA 94111
D	CAHILL, THOMAS P	4351 LATHAM STREET, SUITE 100	RIVERSIDE CA 92501

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

000003448720--2

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

*[Signature]*  
BRIAN COURTNEY, ASST. V.P.  
REGISTERED AGENT MUST SIGN

Date

10/30/90

11. I certify that I am an officer or director of 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:

*[Signature]*  
Judy N. Kelley

Date

Daytime Phone #

10/23/90

CR20040 (8/00)



ACCOUNT NO. : 072100000032

REFERENCE : 877978 7139998

AUTHORIZATION :

COST LIMIT : \$ 750.00

ORDER DATE : October 26, 2000

ORDER TIME : 11:32 AM

ORDER NO. : 877978-035

CUSTOMER NO: 7139998

CUSTOMER: Ms. Linda Hart  
USI HOLDINGS, INC.  
USI HOLDINGS, INC.  
50 California St.  
24th Floor  
San Francisco, CA 94111

DOMESTIC FILING

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

EFFECTIVE DATE:

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  
XX PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS:

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
00 OCT 30 PM 12:06  
NOT RECORDED  
TO ACHIEVE  
SUFFICIENCY OF FILING

18292

Patricia Pyjot