

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUN -3 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000029527

1. Corporation Name

Union Planters Insurance Agency of Florida, Inc.

2. Principal Office Address

9431 US Hwy 19
Suite, Apt. #, etc.

3. Mailing Office Address

810 Crescent Centre Dr.
Suite, Apt. #, etc.

City & State

Port Richey FL

City & State

Franklin TN

Zip

34668

Country

Zip

37067

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

4/1/97

5. FEI Number

65-0755413

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Cynthia L. Harris

Cynthia L. Harris
as its agent

Date

5/15/03

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	See attached		

10. 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:

X [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 05/19/03

Date

Daytime Phone #

CR2001 (10/02)

9/6/3

Attachment



Member NASD & SIPC

May 14, 2003

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Annual Report for Union Planters Insurance Agency of Florida, Inc.

To Whom It May Concern:

As instructed, I am writing to your office requesting a correction to the mailing address you have on file for our corporation. Due to an incorrect mailing address, we did not receive our annual report for the past two filing periods and are now in an inactive status.

I appreciate your offer to waive any and all late filing fees, and do accept that offer. Should you have any questions regarding this matter, please contact me at (615) 309-3565.

Sincerely,

A handwritten signature in cursive script that reads "Sandie D. Clark".

Sandie D. Clark
Legal Administrator

Four Corporate Centre
P.O. Box 682388 • 37068-2388
810 Crescent Centre Drive, Suite 400 • Franklin, TN 37067
Phone (615) 377-3085 • (888) 999-PFIC • Fax (615) 309-3476

Not A Deposit • Not FDIC-Insured • Not Guaranteed By Any Bank
May Go Down In Value • Not Insured By Any Federal Government Agency

Attachment

**PFIC AGENCIES
AND
UNION PLANTERS INSURANCE AGENCIES OFFICERS**

AGENCY DIRECTORS

ALAN W. KENNEBECK	6200 Poplar Ave, Memphis TN 38119
JOANNE B. COLLINS	6200 Poplar Ave, Memphis TN 38119
MARGARET A. YEAGER	810 Crescent Centre Drive, Suite 300, Franklin TN 37067

AGENCY OFFICERS

ALAN W. KENNEBECK, Chairman and CEO	6200 Poplar Ave, Memphis TN 38119
JOANNE B. COLLINS, President	6200 Poplar Ave, Memphis TN 38119
CHARLES I. PEARMAN, Executive Vice President	810 Crescent Centre Dr., Suite 300, Franklin TN 37067
MARGARET A. YEAGER, Executive Vice President	810 Crescent Centre Dr., Suite 300, Franklin TN 37067
RANDY E. BUTLER, Treasurer	810 Crescent Centre Dr., Suite 300, Franklin TN 37067
SCOTT F. SMITH, Assistant Treasurer	810 Crescent Centre Dr., Suite 300, Franklin TN 37067
PAM R. FILLMORE, Secretary	810 Crescent Centre Dr., Suite 300, Franklin TN 37067
NANCY L. O'SHEA, Assistant Secretary	810 Crescent Centre Dr., Suite 300, Franklin TN 37067