

F000000003629  
TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: CORNERSTONE NATIONAL INSURANCE COMPANY  
(Name of corporation - must include suffix)

Dear Sir or Madam: 00789-00644-00647-00671

MJH

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

GREG K. FICK

(Name of Person)

CORNERSTONE NATIONAL INSURANCE COMPANY

(Firm/Company)

1000 W. Nifong Blvd. Building B Suite 200

(Address)

Columbia, Missouri 65203

(City/State/Zip)

Should you need to call someone concerning this matter, please call:

W-14582-  
800003276739-5  
-06/05/00--01094--011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

GREG K. FICK

(Name of Person)

at (573) 817-2481

(Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 JUN 26 AM 10:44

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy



**COPY**

**FLORIDA DEPARTMENT OF STATE**

**Katherine Harris**  
Secretary of State

June 8, 2000

**GREG K. FICK**  
**CORNERSTONE NATIONAL INSURANCE COMPANY**  
**1000 W. NIFONG BLVD., BLDG. 8, STE 200**  
**COLUMBIA, MO 65203**

**SUBJECT: CORNERSTONE NATIONAL INSURANCE COMPANY**  
Ref. Number: W00000014582

We have received your document for CORNERSTONE NATIONAL INSURANCE COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 000A00032644

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

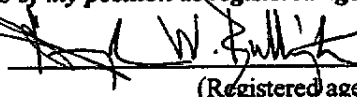
1. CORNERSTONE NATIONAL INSURANCE Company  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Missouri 3. 43-1773560  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/06/97 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1000 W. Nifong Blvd. Building B Suite 200  
Columbia, Missouri 65203  
(Current mailing address)
8. INSURANCE - PRIVATE PASSENGER Automobile  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
- Name: Douglas Warren Bullington
- Office Address: 1300 Sawgrass Corporate Parkway, Suite 300  
Sunrise, Florida, 33323  
(Zip code)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

**A. DIRECTORS** (Street address only - P.O. Box NOT acceptable)

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

SEE ATTACHMENT

**B. OFFICERS** (Street address only - P.O. Box NOT acceptable)

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

SEE ATTACHMENT

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. \_\_\_\_\_

Greg Kent Fick, Vice President, Treasurer and Director

(Typed or printed name and capacity of person signing application)

# Cornerstone National Insurance Company

Names and Residence Addresses of Officers and/or Directors

| <u>Name</u>               | <u>Title</u>                                    | <u>Residence Address</u>                       |
|---------------------------|---|--|
| Allen, Daniel Harold      | Vice President and Director                     | 2400 Topaz Drive, Columbia, MO. 65203          |
| Fick, Greg Kent           | Vice President and Treasurer and Director       | 2802 Melody Lane, Columbia, MO. 65203          |
| Forrest, David Scott      | Vice President and Director                     | 605 Maplewood Drive, Columbia, MO. 65203       |
| French, James Carl        | <b>President</b> and Director and Vice Chairman | 5413 W. Tayside Circle, Columbia, MO. 65203    |
| Godfrey, James Edward Jr. | Director Only                                   | 10317 Arthur, Frontenac, MO. 63131             |
| Harrison, Brian Garland   | Director Only                                   | 4309 Montpelier Place, Columbia, MO. 65203     |
| Holland, Earl P.          | Director Only                                   | 15270 Kilbirmie Dr. SE, Fort Meyers, FL. 33912 |
| Hotze, Dale William       | Director Only                                   | 6524 Overbrook, Mission Hills, KS. 66208       |
| McKee, Roger Glenn        | Director Only                                   | 3929 Augusta, Columbia, MO. 65203              |
| Reid, Robert              | Vice President                                  | 2950 W. Picket Post. Columbia, MO. 65203       |
| Silvey, James Monroe      | <b>Chairman</b>                                 | 3700 W. Rollins Road, Columbia, MO. 65203      |
| Walker, Roger Dwayne      | Vice President and Director                     | 1711 S. Fairview Road, Columbia, MO. 65203     |
| Woodbridge, John William  | Vice President, <b>Secretary</b> and Director   | 2606 Grant Lane, Columbia, MO. 65203           |

No. I00438195

# STATE OF MISSOURI



**Rebecca McDowell Cook**  
**Secretary of State**

CORPORATION DIVISION

## CERTIFICATE OF CORPORATE GOOD STANDING

I, REBECCA McDOWELL COOK, Secretary of State of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

CORNERSTONE NATIONAL INSURANCE COMPANY

was incorporated under the laws of this State on the 6th day of MARCH, 1997, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 19th day of JUNE, 2000.

*Rebecca McDowell Cook*  
Secretary of State

