

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 27 AM 9:16

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P26864

1. Corporation Name

KEMPER EMPLOYERS INSURANCE COMPANY

Principal Place of Business

Mailing Address

~~ONE KEMPER DRIVE~~
~~LONG GROVE IL 60049~~
~~US~~

~~ONE KEMPER DRIVE~~
~~LONG GROVE IL 60049~~
~~US~~



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
2101 4th Avenue

3. New Mailing Office Address, If Applicable
2101 4th Avenue

Suite, Apt. #, etc.
Suite 1700 1600

Suite, Apt. #, etc.
Suite 1700 1600

City & State
Seattle, WA

City & State
Seattle, WA

Zip Country
98121 USA

Zip Country
98121 USA

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

11/13/1989

5. FEI Number

43-1436329

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	PASQUALETTO, JOHN G	ONE KEMPER DRIVE 2101 4th Avenue Suite 1700 1600	LONG GROVE IL 60049 Seattle, WA 98121
VP	HAMES, ROBERT GERGASKO, RICH	ONE KEMPER DRIVE 2101 4th Avenue Suite 1700	LONG GROVE IL 60049 Seattle, WA 98121
S	CONWAY, JOHN K DE VITA, JOE	ONE KEMPER DRIVE 2101 4th Avenue Suite 1700	LONG GROVE IL 60049 Seattle, WA 98121
T	FINELLI, MICHAEL A JR DE VITA, JOE	ONE KEMPER DRIVE 2101 4th Avenue Suite 1700	LONG GROVE IL 60049 Seattle, WA 98121
D	JOSEPHSON, MURAL R CAVANO, PETER Y	ONE KEMPER DRIVE 2101 4th Avenue Suite 1700 1600	LONG GROVE IL 60049 Seattle, WA 98121
D	MATHIS, DAVID B PARKER, JI SCOTT	ONE KEMPER DRIVE 2101 4th Avenue Suite 1700 1600	LONG GROVE IL 60049 Seattle, WA 98121

8. Name and Address of Current Registered Agent

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE FL 32399

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

700024169347
10/27/03--01075--01 State: FL Zip Code: 32309

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. or 617.0505, F.S.

Completing this box is not necessary, per the Department of State.

Signature of
Registered Agent

Date

REGISTERED AGENT MUST SIGN

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 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:

JOSEPH S DE VITA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/24/03 206-TR-8315

CR2E040 (7/03)

**Kemper Employers
Insurance Company**

2101 4th Avenue, Suite 1600
Seattle, WA 98121

Phone: 206 770 8300
Toll Free: 800 372 2255

Fax: 206 448 4442

VIA FEDERAL EXPRESS

October 24, 2003

Division of Corporations
Annual Report/Reinstatement Section
409 East Gaines Street
Tallahassee, FL 32399

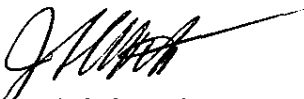
RE: KEMPER EMPLOYERS INSURANCE COMPANY

To Whom It May Concern:

The UBR notices for Kemper Employers Insurance Company were not received; therefore, the Company has enclosed with its Application for Reinstatement a \$150.00 profit corporation filing fee.

Please reinstate Kemper Employers Insurance Company and return a Certificate of Status to me at the address above.

Sincerely,



Joseph S. De Vita
Secretary

JDV/kf
Enclosures

**Kemper Employers
Insurance Company**

2101 4th Avenue, Suite 1600
Seattle, WA 98121

Phone: 206 770 8300
Toll Free: 800 372 2255

Fax: 206 448 4442

VIA FEDERAL EXPRESS

October 24, 2003

Division of Corporations
Annual Report/Reinstatement Section
409 East Gaines Street
Tallahassee, FL 32399

RE: KEMPER EMPLOYERS INSURANCE COMPANY

To Whom It May Concern:

On behalf of Kemper Employers Insurance Company, I have enclosed a letter regarding non-receipt of the UBR notices, an Application for Reinstatement and check in the amount of \$150.00 filing fee.

Please reinstate Kemper Employers Insurance Company and return a Certificate of Status to me at the address above, using Federal Express account number 279708822.

Sincerely,



Joseph S. De Vita
Secretary

JDV/kf
Enclosures