| STATE OF INDIANA) |) BEFORE THE INDIANA | |
|---|---|--|
| COUNTY OF MARION) SS: | COMMISSIONER OF INSURANCE Cause Number: 15355-AG16-0614-131 | |
| | | |
| IN THE MATTER OF |) | |
| Waites & Foshee Ins Inc. P.O. Box 4803 |) FILED | |
| Macon, GA 31208 | 3 8 69 503 65 | |
| Respondent | AUG 25 2016 | |
| |) STATE OF INDIANA DEPT. OF INSURANCE | |
| Type of Agency Action: Enforcement |) | |
| Producer's License: 3158616 |) | |

FINAL ORDER

The Enforcement Division of the Indiana Department of Insurance ("Department"), by counsel, Cathleen Nine-Altevogt, and Waites & Foshee Ins Inc. ("Respondent"), a licensed nonresident insurance producer organization, signed an Agreed Entry which purports to resolve all issues involved in the above-captioned cause number, and which has been submitted to the Commissioner of the Indiana Department of Insurance ("Commissioner") for approval.

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry, attached, as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.

IT IS THEREFORE ORDERED by the Commissioner as follows:

- 1. Respondent shall pay an administrative fine of two hundred fifty dollars (\$250) within thirty (30) days after the Commissioner signs the Final Order, for their failure to disclose on their application for licensure a February 11, 2009 Consent Order issued by the Florida Office of Insurance Regulation.
- 2. The Department agrees to accept this agreement as full resolution of this matter.

ALL OF WHICH IS ORDERED this 25 day of 4

2016

Stephen W. Robertson, Commission Indiana Department of Insurance

Distribution:

Calla Dain, Insurance Investigator Indiana Department Of Insurance 311 West Washington St, Suite 103 Indianapolis, Indiana 46204-2787 Waites & Foshee Ins Inc C/O Jean W. Stroud P.O. Box 4803 Macon, GA 31208

Certified Mail Receipt: 91 7190 0005 2720 0062 6926

| STATE OF INDIANA |)) | BEFORE THE I | NDIANA |
|---|-----------|-----------------------------------|--|
| COUNTY OF MARION |) 55: | COMMISSIONI | ER OF INSURANCE |
| | | CAUSE NUMBER: 15355-AG16-0614-131 | |
| IN THE MATTER OF: | |) | D. |
| Waites & Foshee Ins Inc P.O. Box 4803 Macon, GA 31208 | |))) | FILED |
| Respondent | |) | AUG 25 2016 |
| Type of Agency Action: En | forcement |) | STATE OF INDIANA DEPT. OF INSURANCE |
| Producer's License: 315861 | 16 |) | |

AGREED ENTRY

This Agreed Entry is executed by and between the Enforcement Division of the Indiana Department of Insurance ("Department"), by counsel, Cathleen Nine-Altevogt, and Waites & Foshee Ins Inc. ("Respondent"), to resolve all issues in the above-captioned cause number. This Agreed Entry is subject to the review and approval of the Department's Commissioner, Stephen W. Robertson ("Commissioner");

WHEREAS, Respondent is a licensed nonresident producer organization, holding license number 3158616;

WHEREAS, On May 04, 2016 Respondent submitted an application for a nonresident producer organization license, which was approved;

WHEREAS, On that application, Respondent failed to disclose their February 11, 2009 Consent Order issued by the Florida Office of Insurance Regulation;

- 7. The Department agrees to accept Respondent's compliance with this agreement as full satisfaction of this matter.
- 8. Respondent has carefully read and examined this agreement and fully understands and accepts its terms.
- 9. Respondent has entered into this agreement freely, and has not been subject to duress, threat or undue influence.
- 10. Should this Agreed Entry not be accepted by the Commissioner, it is agreed that presentation to and consideration of this Agreed Entry by the Commissioner shall not unfairly or illegally prejudice the Commissioner from further participation in or resolution of these proceedings.
- 11. Respondent is aware that failure to comply with any terms of this agreement will result in the matter being set for a hearing.

Date Signed

Cathleen Nine-Altevogt, Attorney #32706-49

Indiana Department of Insurance

Waites & Foshee Ins Inc, Respondent

RECEIVED

AUG 1 5 2016

STATE OF INDIANA DEPT. OF INSURANCE