FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 15 PM 3:06

DOCUMENT # 196817 (1)

1. Corporation Name
ALEXANDER & ALEXANDER, INC.

Principal Place of Business	Mailing Address
10461 MILL RUN CIRCLE OWINGS MILLS MD 21117	10461 MILL RUN CIRCLE OWINGS MILLS MD 21117

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/15/1956
3a. Date of Last Report: 02/21/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 59-0876526 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	Director	☒ Change ☐ Addition
NAME	~~OSTERHOUT, DAN~~	1.2 NAME	Lawrence E. Burk	
STREET ADDRESS	~~5 KENSINGTON PLACE~~	1.3 STREET ADDRESS	6 Seminole Way	
CITY-ST-ZIP	~~WESTPORT CT~~	1.4 CITY-ST-ZIP	Chatham, NJ 07928	
TITLE	T	2.1 TITLE		☐ Change ☐ Addition
NAME	KERSHAW, R. ALAN	2.2 NAME		
STREET ADDRESS	5 FOREST RIDGE COURT	2.3 STREET ADDRESS		
CITY-ST-ZIP	TIMONIUM MD	2.4 CITY-ST-ZIP		
TITLE	VPS	3.1 TITLE		☐ Change ☐ Addition
NAME	RUSSELL, ALICE L.	3.2 NAME		
STREET ADDRESS	2802 FOREST GLEN DR.	3.3 STREET ADDRESS		
CITY-ST-ZIP	BALDWIN MD	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE	Director	☒ Change ☐ Addition
NAME	~~WHITE, MICHAEL K.~~	4.2 NAME	Robert Needle	
STREET ADDRESS	~~61 BALDWIN FARMS, SOUTH~~	4.3 STREET ADDRESS	16 Eisenhard Drive	
CITY-ST-ZIP	~~GREENWICH, CT 00000~~	4.4 CITY-ST-ZIP	Ivyland, PA 18974	
TITLE	P	5.1 TITLE		☐ Change ☐ Addition
NAME	BELTRAN, JUAN E.	5.2 NAME		
STREET ADDRESS	380 LEUCADENDRA DR.	5.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alice L. Russell Alice L. Russell 2/8/95 (410)363-5801
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Vice President & Secretary Daytime Phone #

0307305 FP