FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State
05-06-1999 90286 001 *1,500.00

DOCUMENT # F15647

1. Corporation Name
ORMOND INSURANCE AND REINSURANCE MANAGEMENT SERVICES, INC.

Principal Place of Business	Mailing Address
140 S. ATLANTIC AVE., SUITE 400 ORMOND BEACH FL 32176 US	140 S. ATLANTIC AVE., SUITE 400 ORMOND BEACH FL 32176 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 01/22/1981

2. Principal Place of Business	2a. Mailing Address
21	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: 59-2079631 ☐ Applied For ☐ Not Applicable

5. Certifcate 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 owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ORMOND RE GROUP, INC.
140 S. ATLANTIC AVE., SUITE 400
ORMOND BEACH FL 32176

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	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BURT, W LOCKWOOD		1.2 NAME		
STREET ADDRESS	140 S. ATLANTIC AVE., SUITE 400		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH FL 32176		1.4 CITY-ST-ZIP		
TITLE	SVTD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LONG, WILLIAM T		2.2 NAME		
STREET ADDRESS	140 S. ATLANTIC AVE., SUITE 400		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH FL 32176		2.4 CITY-ST-ZIP		
TITLE	EVSD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DEINER, JOHN		3.2 NAME		
STREET ADDRESS	140 S. ATLANTIC AVE., SUITE 400		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH FL 32176		3.4 CITY-ST-ZIP		
TITLE	SVD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	DIPARDO, ANTHONY L		4.2 NAME		
STREET ADDRESS	140 S. ATLANTIC AVE., SUITE 400		4.3 STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH FL 32176		4.4 CITY-ST-ZIP		
TITLE	AV	XX DELETE	5.1 TITLE	Vice President	☐ Change ☒ Addition
NAME	LEE, M.M.		5.2 NAME	Hartz, A.J.	
STREET ADDRESS	140 S. ATLANTIC AVE., SUITE 400		5.3 STREET ADDRESS	140 S. Atlantic Avenue, Suite 400	
CITY-ST-ZIP	ORMOND BEACH FL 32176		5.4 CITY-ST-ZIP	Ormond Beach, FL 32176	
TITLE	AV	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BUTCKA, A.A.		6.2 NAME		
STREET ADDRESS	140 S. ATLANTIC AVE., SUITE 400		6.3 STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH FL 32176		6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: William T. Long 4-14-99 (904) 677-4453
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)