

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000042913

**FILED**  
**Apr 17, 2015**  
**Secretary of State**  
**CC3881948346**

**Entity Name:** FINANCIAL & INSURANCE MANAGEMENT RESOURCES, INC.

**Current Principal Place of Business:**

1110 WEST COMMERCIAL BLVD  
FT LAUDERDALE, FL 33309

**Current Mailing Address:**

1110 WEST COMMERCIAL BLVD  
FT LAUDERDALE, FL 33309

**FEI Number: 27-4334585**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MILLER, TRAVIS L  
301 SOUTH BRONOUGH STREET STE 200  
TALLAHASSEE, FL 32301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT / CEO	Title	COO
Name	DOWNES, SEAN P	Name	SPRINGER, JON W
Address	1110 W COMMERCIAL BLVD	Address	1110 WEST COMMERCIAL BLVD
City-State-Zip:	FORT LAUDERDALE FL 33309	City-State-Zip:	FT LAUDERDALE FL 33309

Title SECRETARY  
Name DONAGHY, STEPHEN J  
Address 1110 WEST COMMERCIAL BLVD  
City-State-Zip: FT LAUDERDALE FL 33309

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: SEAN DOWNES**

**PRESIDENT**

**04/17/2015**

Electronic Signature of Signing Officer/Director Detail

Date