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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 APR 11 PM 9:21

DOCUMENT # 221310 (6)

1. Corporation Name

HILB, ROGAL AND HAMILTON COMPANY OF FORT LAUDERD ALE

Principal Place of Business	Mailing Address
P.O. BOX 24527 FT. LAUDERDALE FL 33307	P.O. BOX 24527 FT. LAUDERDALE FL 33307

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/13/1959
3a. Date of Last Report: 04/11/1994

2. Principal Place of Business
21 1000 Corporate Drive
Suite, Apt. #, etc.
22 Suite 100
City & State
23 Fort Lauderdale, FL
Zip 24 33334 Country 25 USA

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-0868164 ☐ 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	WILCOX, RICHARD W JR	1.2 NAME	
STREET ADDRESS	1000 CORPORATE DRIVE, STE. 100	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33334	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	COPPIN, JOHN S	2.2 NAME	
STREET ADDRESS	1000 CORPORATE DRIVE, STE. 100	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33334	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	ROGAN, THOMAS B JR	3.2 NAME	
STREET ADDRESS	1000 CORPORATE DRIVE, STE. 100	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33334	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	☐ Change ☐ Addition
NAME	EURINGER, CLEMENS	4.2 NAME	
STREET ADDRESS	1000 CORPORATE DRIVE, STE. 100	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33334	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	LOMBARD, ROCCI	5.2 NAME	
STREET ADDRESS	1000 CORPORATE DRIVE, STE. 100	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33334	5.4 CITY-ST-ZIP	
TITLE	VD	6.1 TITLE	☐ Change ☐ Addition
NAME	HILB, ROBERT H	6.2 NAME	
STREET ADDRESS	4235 INNSLAKE DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	GLEN ALLEN VA 23060	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: Richard W. Wilcox, Jr. 4-5-95 305-772-5954
SIGNATURE AND NAME OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0432030 FP