

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91528 038 ***150.00

DOCUMENT # F01000006312

1. Entity Name

Hilb, Megal and Hamilton Company of
Southern New Jersey

DO NOT WRITE IN THIS SPACE

644062

2. Principal Place of Business

1015 Briggs Road

Suite, Apt. #, etc.

3. Mailing Address

4451 Lake Brook Drive

Suite, Apt. #, etc.

500

DO NOT WRITE IN THIS SPACE

City & State

Mt. Laurel, NJ

City & State

Glen Allen, VA

4. FEI Number

21-0720614

Applied For

Not Applicable

Zip

08504

Country

U.S.

Zip

23060

Country

U.S.

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Carl J. Timpanaro 228 Longwood Avenue Chatham, NJ 07928	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Christopher D. Campino 12 Autumn Dr. Moorestown, NJ 08507	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JD Timothy J. Korman 4451 Lake Brook Dr. Ste 500 Glen Allen, VA 23060	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Walter L. Smith 4451 Lake Brook Dr. Ste 500 Glen Allen, VA 23060	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Carolyn Jones 4451 Lake Brook Dr. Ste 500 Glen Allen, VA 23060	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Genasino M. Campanaro 1400 Endigo Avenue Williamstown, NJ 08094	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02

Date

804-747-3175

Daytime Phone #

CR2E034B (12/01)