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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F33530 (9)

1. Corporation Name

BANKERS INTERNATIONAL SECURITIES, INC.

Principal Place of Business

Mailing Address

BOX 15707
ST PETERSBURG FL 33733
US

BOX 15707
ST PETERSBURG FL 33733-5707
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/04/1981

3a. Date of Last Report

04/27/1996

4. FEI Number

59-2088756

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

DELANO, G. KRISTIN
360 CENTRAL AVE
ST PETERSBURG FL 33701

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

TITLE DC ☐ DELETE

NAME MENKE, ROBERT M.
STREET ADDRESS 360 CENTRAL AVE
CITY-ST-ZIP ST PETERSBURG FL

TITLE V ☐ DELETE

NAME SMITH, GRAEME H.
STREET ADDRESS 360 CENTRAL AVE
CITY-ST-ZIP ST PETERSBURG FL

TITLE DT ☐ DELETE

NAME HUSSEMAN, EDWIN C.
STREET ADDRESS 360 CENTRAL AVE
CITY-ST-ZIP ST PETERSBURG FL

TITLE D ☐ DELETE

NAME MEEHAN, DAVID K.
STREET ADDRESS 360 CENTRAL AVENUE
CITY-ST-ZIP ST PETERSBURG FL

TITLE DS ☐ DELETE

NAME DELANO, G. KRISTIN
STREET ADDRESS 360 CENTRAL AVE
CITY-ST-ZIP ST PETERSBURG FL

TITLE DSVP ☐ DELETE

NAME NIX, GILMER
STREET ADDRESS 360 CENTRAL AVE
CITY-ST-ZIP ST. PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P, D ☐ Change ☒ Addition

1.2 NAME Fisher, Benjamin E.
1.3 STREET ADDRESS 360 Central Avenue
1.4 CITY-ST-ZIP St. Petersburg, FL 33701

2.1 TITLE SVP, D ☐ Change ☒ Addition

2.2 NAME Roberts, Gerald S.
2.3 STREET ADDRESS 360 Central Avenue
2.4 CITY-ST-ZIP St. Petersburg, FL 33701

3.1 TITLE SVP ☐ Change ☒ Addition

3.2 NAME Scales, David E.
3.3 STREET ADDRESS 360 Central Avenue
3.4 CITY-ST-ZIP St. Petersburg, FL 33701

4.1 TITLE AS ☐ Change ☒ Addition

4.2 NAME Southey, Robert G.
4.3 STREET ADDRESS 360 Central Ave.
4.4 CITY-ST-ZIP St. Petersburg, FL 33701

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kristin Delano

2/17/97

(813) 823-4000x4416

Date

Daytime Phone #

0379783

CR2E034 (9/96)