

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2008 8:00 am
Secretary of State

02-22-2008 90014 003 ***150.00

DOCUMENT # F33530				
1. Entity Name BANKERS INTERNATIONAL SECURITIES, INC.				
Principal Place of Business 11101 ROOSEVELT BLVD., N., 4TH FLOOR LEGAL DEPT ST PETERSBURG, FL 33716 US		Mailing Address 11101 ROOSEVELT BLVD., N., 4TH FLOOR LEGAL DEPT ST PETERSBURG, FL 33716 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	



01182008 Chg-P CR2E034 (12/06)

4. FEI Number
59-2088756

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SMITH, GRAEME H 11101 ROOSEVELT BLVD., N., 4TH FLOOR LEGAL DEPT ST PETERSBURG, FL 33716		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

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. I am familiar with, and accept the obligations of registered agent.

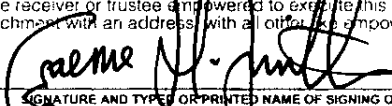
SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	MENKE, ROBERT M	NAME	
STREET ADDRESS	360 CENTRAL AVE	STREET ADDRESS	11101 Roosevelt Blvd. N.
CITY-ST-ZIP	ST PETERSBURG, FL 33701	CITY-ST-ZIP	St. Petersburg, Florida 33716
TITLE	DPS ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	SMITH, GRAEME H	NAME	
STREET ADDRESS	360 CENTRAL AVE	STREET ADDRESS	11101 Roosevelt Blvd. N.
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701	CITY-ST-ZIP	St. Petersburg, Florida 33716
TITLE	DT ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	HUSSEMAN, EDWIN C	NAME	
STREET ADDRESS	360 CENTRAL AVE	STREET ADDRESS	11101 Roosevelt Blvd. N.
CITY-ST-ZIP	ST PETERSBURG, FL 33701	CITY-ST-ZIP	St. Petersburg, Florida 33716
TITLE	D ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	MEEHAN, DAVID K	NAME	
STREET ADDRESS	360 CENTRAL AVENUE	STREET ADDRESS	11101 Roosevelt Blvd. N.
CITY-ST-ZIP	ST PETERSBURG, FL 33701	CITY-ST-ZIP	St. Petersburg, Florida 33716
TITLE	V ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	GRAY, WILLIAM	NAME	
STREET ADDRESS	360 CENTRAL AVE	STREET ADDRESS	11101 Roosevelt Blvd. N.
CITY-ST-ZIP	SAINT PETERSBURG, FL 33701	CITY-ST-ZIP	St. Petersburg, Florida 33716
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address with all officers empowered.

SIGNATURE:  **Graeme H. Smith, President** 2/8/2008 727-894-4336

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone *