

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90676 001 *4,800.00

DOCUMENT # F33530

1. Entity Name

BANKERS INTERNATIONAL SECURITIES, INC.



Principal Place of Business
BOX 15707
ST PETERSBURG FL 33733
US

Mailing Address
BOX 15707
ST PETERSBURG FL 33733
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2088756**

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~SNYDER, DAVID B~~
360 CENTRAL AVE
ST PETERSBURG FL 33701

Name
Southey, Robert G.
Street Address (P.O. Box Number is Not Acceptable)
360 Central Ave.
City
St. Petersburg **FL** Zip Code
33701

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 **4/17/2003**
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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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 <input type="checkbox"/> Delete
NAME	MENKE, ROBERT M
STREET ADDRESS	360 CENTRAL AVE
CITY-ST-ZIP	ST PETERSBURG FL 33701
TITLE	V <input type="checkbox"/> Delete
NAME	SMITH, GRAEME H
STREET ADDRESS	360 CENTRAL AVE
CITY-ST-ZIP	ST PETERSBURG FL 33701
TITLE	DT <input type="checkbox"/> Delete
NAME	HUSSEMAN, EDWIN C
STREET ADDRESS	360 CENTRAL AVE
CITY-ST-ZIP	ST PETERSBURG FL 33701
TITLE	D <input type="checkbox"/> Delete
NAME	MEEHAN, DAVID K
STREET ADDRESS	360 CENTRAL AVENUE
CITY-ST-ZIP	ST PETERSBURG FL 33701
TITLE	AS <input checked="" type="checkbox"/> Delete
NAME	HAIRE, NANCY C
STREET ADDRESS	360 CENTRAL AVE
CITY-ST-ZIP	ST. PETERSBURG FL 33701
TITLE	PCGP <input checked="" type="checkbox"/> Delete
NAME	SNYDER, DAVID C
STREET ADDRESS	360 CENTRAL AVE
CITY-ST-ZIP	ST. PETERSBURG FL 33701

TITLE	D EVP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Swenson, Andrew J.
STREET ADDRESS	360 Central Ave.
CITY-ST-ZIP	St. Petersburg, FL 33701
TITLE	D P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Pierce, Douglas B.
STREET ADDRESS	360 Central Ave.
CITY-ST-ZIP	St. Petersburg, FL 33701
TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Southey, Robert G.
STREET ADDRESS	360 Central Ave.
CITY-ST-ZIP	St. Petersburg, FL 33701
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert G. Southey **4/17/2003** **727 823-4000**

Secretary

Date Daytime Phone #

CR2E034 (10/02)