

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90096 046 ***150.00

DOCUMENT # F76798

1. Corporation Name

HILB, ROGAL AND HAMILTON COMPANY OF FORT MYERS

Principal Place of Business

1614 COLONIAL BLVD. (33907)
P.O. BOX 6188
FORT MYERS FL 33907-1130

Mailing Address

1614 COLONIAL BLVD. (33907)
P.O. BOX 6188
FORT MYERS FL 33907-1130

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1982

4. FEI Number

62-1135526

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 owes the current year Intangible
Personal Property Tax.

☐

☐

No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
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

TITLE C ☐ DELETE

NAME HILB, ROBERT H.
STREET ADDRESS 8901 GINGER WAY COURT
CITY-ST-ZIP RICHMOND VA

TITLE PCEO ☐ DELETE

NAME ROGAL, ANDREW
STREET ADDRESS 528 BRIARCLIFF ROAD
CITY-ST-ZIP PITTSBURGH PA

TITLE VD ☒ DELETE

NAME ADAMS, JOHN C. J.
STREET ADDRESS 11205 WELLESLEY HARRIS CT.
CITY-ST-ZIP RICHMOND VA

TITLE P ☐ DELETE

NAME DANNENHAUER, DANIEL G.
STREET ADDRESS 3977 WOODLAKE DRIVE
CITY-ST-ZIP BONITA SPRINGS FL

TITLE T ☐ DELETE

NAME KORMAN, TIMOTHY J.
STREET ADDRESS 11730 HAZELTON DRIVE
CITY-ST-ZIP RICHMOND VA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V ☐ Change ☒ Addition

1.2 NAME DANNENHAUER, MICHAEL G.
1.3 STREET ADDRESS 6702 WILLOW LAKE CIR.
1.4 CITY-ST-ZIP FT. MYERS, FL 33912

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/99

Date

(941) 939-1400

Daytime Phone #

CR2E034 (11/98)

044289