

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F76800 (4)
1. Corporation Name
HILB, ROGAL AND HAMILTON COMPANY OF ORLANDO



JUL 20 1998

DO NOT WRITE IN THIS SPACE

Principal Place of Business
201 E. PINE ST., #400
P.O. BOX 871
ORLANDO FL 32801
US

Mailing Address
201 E. PINE ST., #400
P.O. BOX 871
ORLANDO FL 32802-0871
US

3. Date Incorporated or Qualified

04/19/1982

4. FEI Number

62-1135532

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business
21 1040 Woodcock Rd
Suite, Apt. #, etc.
22 Suite 100
City & State
23 Orlando, Florida
Zip
24 32803
Country
25 US

2a. Mailing Address
26 P.O. Box 104000
Suite, Apt. #, etc.
27 Suite 100
City & State
28 Orlando, Florida
Zip
29 32814
Country
30 US

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
MACKENZIE, J. GREGORY
288 CAMBRIDGE DR.
LONGWOOD FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
FOX, DIANNE F.
9415 SIR BARRY DR.
RICHMOND VA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
KORMAN, TIMOTHY J
11730 HAZELTON DR.
RICHMOND, VA 00000

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
HILB, ROBERT H.
8901 GINGER WAY C T
RICHMOND VA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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.

SIGNATURE: Charlotte A. Brubaker

7-9-98 407-893-3733

CR2E034 (5/98)