

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90277 046 ***150.00

DOCUMENT # F76800

1. Entity Name

HILB, ROGAL AND HAMILTON COMPANY OF ORLANDO

Principal Place of Business

Mailing Address

1040 WOODCOCK RD
STE 100
ORLANDO FL 32803
US

4235 INNSLAKE DR.
GLEN ALLEN VA 23060
US

2. Principal Place of Business

3. Mailing Address

800 N. Magnolia Avenue
Suite, Apt. #, etc.
Ste. 1600

Suite, Apt. #, etc.

City & State

City & State

Orlando, Florida

Zip

Country

Zip

Country

32803

US

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME KARL, JAMES B
STREET ADDRESS 1040 WOODCOCK RD
CITY-ST-ZIP ORLANDO FL 32803 ☒ Delete

TITLE President
NAME Benjamin H. Tyler
STREET ADDRESS 800 N. Magnolia Ave., Ste. 1600
CITY-ST-ZIP Orlando, Florida 32803 ☐ Change ☒ Addition

TITLE SD
NAME SMITH, WALTER L.
STREET ADDRESS 12319 COUNTRYVIEW DR
CITY-ST-ZIP GLEN ALLEN VA 23060 ☐ Delete

TITLE Director/Vice President
NAME Martin L. Vaughan, III
STREET ADDRESS 4235 Innslake Dr.
CITY-ST-ZIP Glen Allen, VA 23060 ☐ Change ☒ Addition

TITLE DV
NAME KORMAN, TIMOTHY J
STREET ADDRESS 11730 HAZELTON DR.
CITY-ST-ZIP RICHMOND, VA 00000 23236 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME ROGAL, ANDREW L.
STREET ADDRESS 9023 NORWICK RD
CITY-ST-ZIP RICHMOND VA 23229 ☐ Delete

TITLE Vice President
NAME Andrew L. Rogal
STREET ADDRESS 4235 Innslake Dr.
CITY-ST-ZIP Glen Allen, VA 23060 ☒ Change ☐ Addition

TITLE T
NAME JONES, CAROLYN
STREET ADDRESS 4200 BROMLEY LANE
CITY-ST-ZIP RICHMOND VA 23221 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 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

4/16/01

Date

(804) 747-6500

Daytime Phone #

CR2E034 (10/00)