

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

FILED

Jan 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000003179 (7)**

1. Corporation Name
AMERICAN INSURANCE MANAGERS, INC.



Principal Place of Business 3101 TOWERCREEK PKWY., STE 600 ATLANTA GA 30339-3256	Mailing Address 3101 TOWERCREEK PKWY., STE 600 ATLANTA GA 30339-3256
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 06/30/1995	3a. Date of Last Report 03/06/1996
		4. FEI Number 58-1526098	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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS 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
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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 _____ (NOTE: Registered Agent signature required when re-stating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DC	☐ DELETE DENNETT-SMITH, DAVID A 3134 ARDEN RD ATLANTA GA 30305	1.1 TITLE VP	☐ Change ☒ Addition
NAME D	☐ DELETE HART, ADRIAN C 34 PIERCING HILL, THEYDON BOIS ESSEX CM167JW, U.K.	1.2 NAME RENAUD, ROBERT A.	
STREET ADDRESS DS	☐ DELETE HOLLAND, DONALD V 621 GREENVIEW AVE CONYERS GA 30208	1.3 STREET ADDRESS 670 ESTATE CLUB CIRCLE	
CITY-STATE-ZIP T	☒ DELETE NEIMAS, L. D. 865 DEVENISH LN ROSWELL GA 30075	1.4 CITY-STATE-ZIP ROSWELL, GA 30075	☐ Change ☐ Addition
TITLE V	☐ DELETE SELLMAN, ANTHONY F 2437 CEDARWOOD CT MARIETTA GA 30068	2.1 TITLE	
NAME VP	☒ DELETE COHER, JOAN E 1070 WOODRUFF PLANTATION CT. MARIETTA GA 30067	2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-STATE-ZIP		2.4 CITY-STATE-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	☒ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	☒ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I do 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: Ronald V. Holland 1/10/97 (770) 980-0591
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #