

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # H52686 (3)

1. Corporation Name

BANKERS RISK MANAGEMENT CONSULTANTS, INC.



Principal Place of Business

P.O. BOX 15707  
10051 FIFTH ST. NORTH  
ST. PETERSBURG FL 33733  
US

Mailing Address

P.O. BOX 15707  
10051 FIFTH ST. NORTH  
ST. PETERSBURG FL 33733  
US

3. Date incorporated or Qualified  
04/17/1985

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number  
59-2711126

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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

10. Name and Address of New Registered Agent

DELANO, G. KRISTEN  
360 CENTRAL AVENUE  
ST. PETERSBURG FL 33701

81 Name

DELANO, G. KRISTIN

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 of registered agent or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

2/29/96

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME  
MEEHAN, DAVID K.  
STREET ADDRESS  
360 CENTRAL AVE.  
CITY-ST-ZIP  
ST. PETERSBURG FL

2. TITLE ☐ DELETE

NAME  
HUSSEMAN, EDWIN C.  
STREET ADDRESS  
360 CENTRAL AVE.  
CITY-ST-ZIP  
ST. PETERSBURG FL

3. TITLE ☐ DELETE

NAME  
MENKE, ROBERT M.  
STREET ADDRESS  
360 CENTRAL AVE.  
CITY-ST-ZIP  
ST. PETERSBURG FL

4. TITLE ☐ DELETE

NAME  
SMITH, GRAEME  
STREET ADDRESS  
360 CENTRAL AVE.  
CITY-ST-ZIP  
ST. PETERSBURG FL

5. TITLE ☐ DELETE

NAME  
DELANO, G. KRISTIN  
STREET ADDRESS  
360 CENTRAL AVE.  
CITY-ST-ZIP  
ST. PETERSBURG FL

6. TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-ST-ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

G. Kristin Delano, Secretary

February 29, 1996

(813) 823-4000 ext. 4416

Date

Original Phone #

CR2E034 (12/95)