

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K50125

FILED  
Jan 08, 2002  
Secretary of State

**Entity Name:** INSURANCE AND RISK MANAGEMENT SERVICES, INC.

**Current Principal Place of Business:**

3200 BAILEY LANE  
#105  
NAPLES, FL 34105 US

**New Principal Place of Business:**

**Current Mailing Address:**

3200 BAILEY LANE  
#105  
NAPLES, FL 34105

**New Mailing Address:**

**FEI Number:** 65-0087746

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHMELZLE, CHARLES D  
3200 BAILEY LANE  
#105  
NAPLES, FL 341058506 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SCHMELZLE, GEORGE R.,  
Address: 1119 AUGUSTA FALLS WAY  
City-St-Zip: NAPLES, FL 34119

Title: DP ( ) Delete  
Name: SCHMELZLE, GEORGE C  
Address: 4811 SYCAMORE DRIVE  
City-St-Zip: NAPLES, FL 34119

Title: DV ( ) Delete  
Name: SCHMELZLE, CHARLES D  
Address: 8671 KILKENNY CT  
City-St-Zip: FT. MYERS, FL 33912 US

Title: DV ( ) Delete  
Name: FEDERAU, MICHAEL E  
Address: 2520 TALON COURT #203  
City-St-Zip: NAPLES, FL 34105 US

Title: DV ( ) Delete  
Name: THORNGATE, ROBERT E JR  
Address: 90 MENTOR DRIVE  
City-St-Zip: NAPLES, FL 34110 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: KUHLMAN, WILLIAM H VP  
Address: 3200 BAILEY LANE #105  
City-St-Zip: NAPLES, FL 34105-850 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES D. SCHMELZLE

DV

01/08/2002

Electronic Signature of Signing Officer or Director

Date