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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 11 1996 8:00 am
Secretary of State

DOCUMENT # M05283

(0)

1. Corporation Name

BRITAMCO UNDERWRITERS, INC.

Principal Place of Business

210 UNIVERSITY DR STE 900
CORAL SPRINGS FL 33071

Mailing Address

210 UNIVERSITY DR STE 900
CORAL SPRINGS FL 33071

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

WEICHOLZ, STEPHEN
210 UNIVERSITY DR STE 900
CORAL SPRINGS FL 33071

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 607.0305, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and their registration

(NOTE: Registered Agent's signature is required when re-registering)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	WEICHOLZ, STEPHEN	210 UNIVERSITY DR	CORAL SPRINGS FL	☐
VD	WALKER, IAN	210 UNIVERSITY DR	CORAL SPRINGS FL	☐
TD	SOLOMON, ALBERT S.	210 UNIVERSITY DR	CORAL SPRINGS FL	☐
VD	SUTTER, KENNETH E.	210 UNIVERSITY DR	CORAL SPRINGS FL	☐
VD	MARSH, DARREN	210 UNIVERSITY DRIVE	CORAL SPRINGS FL	☐
VD	WILLIS, DENNIS	210 UNIVERSITY DRIVE	CORAL SPRINGS FL	☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-96

CR2E034 (12/95)