

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **S24701**

(2)

95 JAN 17 PM 12:02

1. Corporation Name

JTB ACTUARIAL CONSULTANTS, INC.

Principal Place of Business

Mailing Address

818 U.S. HIGHWAY 1
SUITE 6
NORTH PALM BEACH FL 33408

818 U.S. HIGHWAY 1
SUITE 6
NORTH PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/14/1991

3a. Date of Last Report
01/19/1994

4. FEI Number

65-0242270

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. 190.032,
Florida Statutes: Yes No

2. Principal Place of Business

2b. Mailing Address

21

26

State, Apt. # etc.

State, Apt. # etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BRENNAN, JEREMIAH T
818 US HIGHWAY 1, STE. 6
NORTH PALM BEACH FL 33408**

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 607.0602 and 607.1608, 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 607.0605, Florida Statutes.

SIGNATURE

JEREMIAH T. BRENNAN PLS.

[Signature]

1/7/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95

TYPE	DP
NAME	BRENNAN, JEREMIAH T.
STREET ADDRESS	818 U.S. HWY 1
CITY, STATE, ZIP	N. PALM BEACH FL
TYPE	DV
NAME	BRENNAN, REGINA L.
STREET ADDRESS	818 U.S. HWY 1
CITY, STATE, ZIP	N. PALM BEACH FL
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
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1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, STATE, ZIP	
5. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, STATE, ZIP	
9. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, STATE, ZIP	
13. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, STATE, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is correct, true and does not qualify for the exemption stated in Section 190.032, Florida Statutes. I further certify that the information included 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 for all the corporations on this report or the event of changes of officers or directors on this report as required by Chapter 607, Florida Statutes, and that my name appears on the report.

SIGNATURE:

JEREMIAH T. BRENNAN PLS.

1/7/95

407 622 9091

PRINTED AND TYPED OR LIMITED NAME OF REGISTERED OFFICER OR DIRECTOR