FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S75052 (8)

1. Name of Corporation

INSURANCE MANAGEMENT INFORMATION SERVICES, INC.

Principal Office Address

P.O. BOX 15707
ST. PETERSBURG FL 33733
US

Mailing Address

P.O. BOX 15707
ST. PETERSBURG FL 33733
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
08/21/1991	05/01/1994

2. Document Number (If Known) 21

2a. Mailing Address 26

4. FEI Number: 59-3111643 — Applied For / Not Applicable

State Agt. # or 22

State Agt. # or 27

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City, State 23

City, State 28

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

City 24 — County 25 — City 29 — County 30

8. Has corporation been liable for unemployment tax under S. 443.036, Florida Statutes? ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

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

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

11. Pursuant to the provisions of Section 607.1622 and/or 608, 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.

G. Kristin Delano

SIGNATURE

12. OFFICER AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICER AND/OR DIRECTORS
	DC	☐ Change ☐ Addition
NAME	MENKE, ROBERT M.	
Street Address	360 CENTRAL AVE.	
City-State-Zip	ST. PETERSBURG FL	
	DP	☐ Change ☐ Addition
NAME	MEEHAN, DAVID K.	
Street Address	360 CENTRAL AVE.	
City-State-Zip	ST. PETERSBURG FL	
	DT	☐ Change ☐ Addition
NAME	HUSSEMANN, EDWIN C.	
Street Address	360 CENTRAL AVE.	
City-State-Zip	ST. PETERSBURG FL	
	DS	☐ Change ☐ Addition
NAME	DELANO, G. KRISTIN	
Street Address	360 CENTRAL AVE.	
City-State-Zip	ST. PETERSBURG FL	
	V	☐ Change ☐ Addition
NAME	MENKE, ROBERT G.	
Street Address	360 CENTRAL AVE.	
City-State-Zip	ST. PETERSBURG FL	
	V	☐ Change ☐ Addition
NAME	KING, KELLY K.	
Street Address	360 CENTRAL AVE.	
City-State-Zip	ST. PETERSBURG FL	

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall constitute an oath or affirmation under the penalties of perjury 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 with an address, with the exception of an officer or director appointed within 60 days.

SIGNATURE: G. Kristin Delano, Secretary 4/14/95 (813) 823-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Area Code & Daytime Telephone Number

0318000 CR