

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S75052

1. Entity Name  
INSURANCE MANAGEMENT SOLUTIONS, INC.

**FILED**  
**Jan 30, 2001 8:00 am**  
**Secretary of State**

01-30-2001 90156 019 \*\*\*150.00

Principal Place of Business

Mailing Address

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

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

2. Principal Place of Business

3. Mailing Address

360 Central Ave.

PO Box 33005

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

Country

33701

USA

Zip

Country

33733-8005

USA

4. FEI Number

59-3111643

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BREAKIRON, CHRISTOPHER P  
360 CENTRAL AVENUE  
ST. PETERSBURG FL 33701

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS HUSSEY, WILLIAM D  
CITY-ST-ZIP 360 CENTRAL AVE.  
ST. PETERSBURG FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS MENKE, ROBERT G  
CITY-ST-ZIP 360 CENTRAL AVE.  
ST. PETERSBURG FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Christopher P. Breakiron

01/17/01

Date

Daytime Phone #

CR2E034 (10/00)

Attachment  
A014832

Insurance Management Solutions, Inc.  
2001 Uniform Business Report  
Document # S75052  
Continuation of Sections 11 and 12

D #575052

11.	Officer and Directors	12	Additions/Changes to Officers and Directors in 11
Title Name Street Address City-St-Zip	D Solomon, Dr. E. Ray 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Tim Fellabaum 360 Central Avenue St. Petersburg, FL 33701
Title Name Street Address City-St-Zip	D Sanchez, Alejandro M. 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Michele K. Morgan 360 Central Avenue St. Petersburg, FL 33701
Title Name Street Address City-St-Zip	D Grant, Senator John A., Jr. 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	DP Howard, David M. 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	VCFO Breakiron, Christopher P. 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	VCOO Gantley, Robert G. 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	V R. Bruce Lunn 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	V Claudette Cope 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	V Beatrice Willis 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	V R. Hale Campbell 360 Central Avenue St. Petersburg, FL 33701	Title Name Street Address City-St-Zip	