## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000047519

Entity Name: JAMISON SPECIAL RISK, INC.

**Current Principal Place of Business:** 

100 EXECUTIVE DR. SUITE 200

WEST ORANGE, NJ 07052

**Current Mailing Address:** 

100 EXECUTIVE DR.

SUITE 200

WEST ORANGE, NJ 07052 US

FEI Number: 22-2793679 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

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:

City-State-Zip:

Electronic Signature of Registered Agent Date

Title

CFO, SENIOR VP

Officer/Director Detail:

Title **SHAREHOLDER** Title **MANAGER** 

ASSUREDPARTNERS CAPITAL, INC. Name Name DONNINI, DAVID A

Address 200 COLONIAL CENTER PARKWAY, Address 300 N. LASALLE STREET SUITE 5600

SUITE 150

CHICAGO IL 60654

CHICAGO IL 60654 City-State-Zip: LAKE MARY FL 32746 City-State-Zip:

Title **MANAGER** 

Name BEBOUT, EUGENE W Name COHEN, AARON D

100 EXECUTIVE DR. SUITE 200 Address 300 N. LASALLE STREET SUITE 5600 Address

City-State-Zip: WEST ORANGE NJ 07052 City-State-Zip: CHICAGO IL 60654

Title CO-CEO, MANAGER Title CO-CEO, MANAGER

Name MCDONALD, JOHN O PATTWELL, SEAN M Name

100 EXECUTIVE DR. SUITE 200 Address Address 100 EXECUTIVE DR. SUITE 200

City-State-Zip: WEST ORANGE NJ 07052 City-State-Zip: WEST ORANGE NJ 07052

Title MANAGER Title **MANAGER** 

Name NOLAN, JOSEPH P Name CHAPMAN, TANNAZ S

Address 300 N. LASALLE STREET SUITE 5600

Address 300 N. LASALLE STREET SUITE 5600 CHICAGO IL 60654 City-State-Zip:

Continues on page 2

I hereby 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 all other like empowered.

02/05/2013 SIGNATURE: SEAN M. PATTWELL CO-CEO, MANAGER

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Feb 05, 2013

**Secretary of State** 

CC8901183168

## Officer/Director Detail Continued:

MANAGER, SR VP Title Name HENDERSON, JIM W

Address 200 COLONIAL CENTER PARKWAY SUITE 150

City-State-Zip: LAKE MARY FL 32746

Title MANAGER, SR VP

VREDENBURG, PAUL Name

Address 200 COLONIAL CENTER PARKWAY SUITE 150

City-State-Zip: LAKE MARY FL 32746

Title CHIEF CORPORATE COUNSEL

KINNETT, STANLEY K II Name

200 COLONIAL CENTER PARKWAY SUITE 150 Address

City-State-Zip: LAKE MARY FL 32746

Title MANAGER, SR VP, SECRETARY

Name RILEY, THOMAS E

Address 200 COLONIAL CENTER PARKWAY

SUITE 150

LAKE MARY FL 32746 City-State-Zip:

Title SENIOR VP CURTIS, DEAN Name

Address 200 COLONIAL CENTER PARKWAY

SUITE 150

LAKE MARY FL 32746 City-State-Zip:

Title CHIEF COUNSEL, ASST. SECRETARY

Name SMITH, WALTER

Address 200 COLONIAL CENTER PARKWAY

SUITE 150

City-State-Zip: LAKE MARY FL 32746