2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V38098

Entity Name: HAMILTON RISK MANAGEMENT CO.

Current Principal Place of Business:

3155 N.W. 77TH AVENUE MIAMI, FL 33122-3700

Current Mailing Address:

3155 N.W. 77TH AVENUE MIAMI. FL 33122-3700 US

FEI Number: 65-0333519 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: DOROTHY ANN BROOKS 01/12/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

PRESIDENT AND DIRECTOR Title Title **TREASURER**

HICKEY, WILLIAM A JR. PAPPAS, SANDRA M Name Name

150 PIERCE ROAD 150 PIERCE ROAD Address Address

6TH FLOOR 6TH FLOOR

City-State-Zip: ITASCA IL 60143 City-State-Zip: ITASCA IL 60143

Title **DIRECTOR** Title **DIRECTOR**

Name REPTA, LEEANN H Name SLATER, RICHARD A JR.

150 PIERCE ROAD 150 PIERCE ROAD Address Address

6TH FLOOR 6TH FLOOR

City-State-Zip: City-State-Zip: ITASC A IL 60143 ITASCA IL 60143

Title SECRETARY

Name MARKETTI, KELLY A. 150 PIERCE ROAD Address City-State-Zip: ITASCA IL 60143

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.

SIGNATURE: WILLIAM A. HICKEY, JR.

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

01/12/2016

FILED Jan 12, 2016

Secretary of State

CC2582691369

Date