

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000003524

**FILED**  
**Feb 24, 2016**  
**Secretary of State**  
**CC5240232023**

**Entity Name:** ROBERTSON TAYLOR INTERNATIONAL INSURANCE BROKERS, INC.

**Current Principal Place of Business:**

21650 OXNARD STREET  
SUITE 2350  
WOODLAND HILLS, CA 91367

**Current Mailing Address:**

21650 OXNARD STREET  
SUITE 2350  
WOODLAND HILLS, CA 91367 US

**FEI Number: 33-0699605**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33401 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name KNOX, BRUCE  
Address 21650 OXNARD STREET  
SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367

Title CEO, SECRETARY  
Name PISCITELLO, LISA  
Address 21650 OXNARD STREET  
SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367

Title PRESIDENT  
Name VIOLAS, SHARI  
Address 21650 OXNARD STREET  
SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR  
Name THORNHILL, CAROL  
Address 21650 OXNARD STREET  
SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367

Title CFO  
Name HUNNISETT, JOE  
Address 21650 OXNARD STREET  
SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367

Title CONTROLLER, TREASURER  
Name MALLORY, RANDALL  
Address 21650 OXNARD STREET  
SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR  
Name FRANCE, IAN  
Address 21650 OXNARD STREET  
SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR  
Name SILCOCK, JOHN  
Address 21650 OXNARD STREET  
SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367

**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.*

**SIGNATURE: SHARI VIOLAS**

**PRESIDENT**

**02/24/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           HENRY, NEIL  
Address        21650 OXNARD STREET  
                  SUITE 2350  
City-State-Zip: WOODLAND HILLS CA 91367