

**2003 FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 29, 2003 8:00 am**  
**Secretary of State**

07-14-2003 90167 006 \*\*\*150.00

DOCUMENT # **F02000002620**

1. Entity Name  
**RISK ADMINISTRATION SERVICES, INC.**



**55052647**

Principal Place of Business  
**3900 WEST 53RD ST.  
SIOUX FALLS SD 57106**

Mailing Address  
**PO BOX 89310  
SIOUX FALLS SD 57109-1008**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country Zip Country

4. FEI Number **46-0407236**

Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent Signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>JOHNSON, RALPH E</b> <b>3900 WEST 53RD ST.</b> <b>SIOUX FALLS SD 57106</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VCP</b> <b>JOHNSON, RICHARD EUGENE</b> <b>3900 WEST 53RD ST.</b> <b>SIOUX FALLS SD 57106</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS</b> <b>JOHNSON, R. EDWARD</b> <b>3900 WEST 53RD ST.</b> <b>SIOUX FALLS SD 57106</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT</b> <b>HERDINA, LEZLEE LONG</b> <b>3900 WEST 53RD ST.</b> <b>SIOUX FALLS SD 57106</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>KLAAHSEN, LARRY EUGENE</b> <b>3900 WEST 53RD ST.</b> <b>SIOUX FALLS SD-57106</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP + GENERAL COUNSEL</b> <b>Robert J. Hollar</b> <b>3900 W. 53rd St.</b> <b>SIOUX FALLS SD 57106</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. HOLLAR  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/09/03  
Date

(605) 362-5672  
Daytime Phone #

Robert J. Hollar

CR2E034 (4/03)

Attachment

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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(L)



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**55052647**

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CHECK HERE IF MAKING CHANGES

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Not Applicable

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SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003, Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

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10. OFFICERS AND DIRECTORS	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS</b> <b>JOHNSON, R. EDWARD</b> <b>3900 WEST 53RD ST.</b> <b>SIOUX FALLS SD 57106</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT</b> <b>HERDINA, LEZLEE LONG</b> <b>3900 WEST 53RD ST.</b> <b>SIOUX FALLS SD 57106</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>KLAHSEN, LARRY EUGENE</b> <b>3900 WEST 53RD ST.</b> <b>SIOUX FALLS SD 57106</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP + General Counsel</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Robert J. Hollan</b> <b>3900 W. 53rd St.</b> <b>SIOUX FALLS SD 57106</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: **SIGNATURE REQUIRED**

**7/09/03 (605)362-5672**

# RAS

RISK ADMINISTRATION SERVICES, INC.

Attachment

55052647  
# F02000002620

July 7, 2003.

Florida Department of State -  
Uniform Business Report  
Division of Corporations  
PO Box 1500  
Tallahassee FL 32302-1500

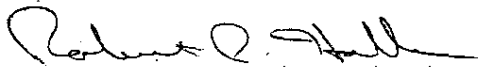
Re: Risk Administration Services, Inc. FEI # 46-0407236  
2003 Uniform Business Report

Greetings:

Enclosed please find a completed Risk Administration Services, Inc. 2003 For Profit Corporation Uniform Business Report and a check in the amount of \$150.00 for payment of the annual fee. We have just recently been granted a certificate of authority in Florida. Therefore, we are respectfully requesting that the \$400 late fee be waived as we have not received any prior notice of the UBR to be filed.

Please acknowledge your receipt of the enclosed fee as full satisfaction of the current year's fees for the above named company. If you should require any further information, please feel free to contact me at the address below, direct via telephone at 605-362-5672 or e-mail at [rob.hollan@rascompanies.com](mailto:rob.hollan@rascompanies.com).

Sincerely,



Robert J. Hollan  
General Counsel

Enclosures: As listed

RISK ADMINISTRATION SERVICES, INC.  
FLORIDA DIV OF CORPORATIONS

Attachment

22436

Check Number 22436  
Check Date Jul 8, 2003  
Check Amount \$150.00

Item to be Paid - Description	Inv Date	Inv Amount	Discount	Amount
020000026 2003 PROFIT CORP BUSN REPORT	7/8/03	150.00		150.00

55052647  
# F0200002620

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER



RISK ADMINISTRATION SERVICES, INC.  
P.O. BOX 89310  
SIOUX FALLS, SD 57109-9310

WELLS FARGO BANK  
SIOUX FALLS, SD 57117

22436

78-4/914

Account

PAY One Hundred Fifty and 00/100 Dollars

DATE

AMOUNT

Jul 8, 2003

\*\*\*\*\*\$150.00

TO THE ORDER OF

FLORIDA DIV OF CORPORATIONS  
UNIFORM BUSN REPORT FILINGS  
P O BOX 1500  
TALLAHASSEE, FL 32302-1500

*Alan D. Seydel*  
AUTHORIZED SIGNATURE

SECURITY FEATURES INCLUDED. DETAILS ON BACK.

022436 091400046 0830001986



RISK ADMINISTRATION SERVICES, INC.

Attachment



55052647  
# F02000002620

July 22, 2003

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Risk Administration Services, Inc. FEI # 46-0407236  
2003 Uniform Business Report

Greetings:

Enclosed please find a copy of recent correspondence received from the Florida Department of State regarding the 2003 UBR. Also enclosed please find copies of our recent correspondence regarding waiver of the UBR late filing fee of \$400.

We have already submitted the \$150 filing fee and are requesting a waiver of the \$400 late filing fee for the reasons stated in my July 7, 2003 correspondence. Please acknowledge the waiver of this fee and full satisfaction of the current year's fees for the above named company.

If you should require any further information, please feel free to contact me at the address below, direct via telephone at 605-362-5672 or e-mail at [rob.hollan@rascompanies.com](mailto:rob.hollan@rascompanies.com).

Sincerely,

Robert J. Hollan  
General Counsel

Enclosures: As listed