## **2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000007372

Entity Name: ACADEMIC MEDICAL PROFESSIONALS INSURANCE RISK

RETENTION GROUP, LLC

**Current Principal Place of Business:** 

58 EAST VIEW LANE, SUITE 2 BARRE, VT 05642

**Current Mailing Address:** 

1605 MAIN STREET SUITE 800

SARASOTA, FL 34236 US

FEI Number: 20-8595533 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FL CHIEF, FINANCIAL OFFICER FLOIR, 200 EAST GAINES STREET TALLAHASSEE', FL 32399 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: FL CHIEF FINANCIAL OFFICER 04/11/2023

Address

Electronic Signature of Registered Agent

Date

**FILED** Apr 11, 2023

Secretary of State

9619183501CC

Authorized Person(s) Detail :

Address

City-State-Zip:

SUITE 310

Title **PRESIDENT** Title VP, SECRETARY Name LASTNER, MARK Name BEATA, BIERNACKA

Address 77 GOODELL STREET Address 77 GOODELL STREET

**SUITE 310** 

City-State-Zip: **BUFFALO NY 14203** City-State-Zip: **BUFFALO NY 14203** 

Title DIRECTOR, CHAIRMAN Title **TREASURER** 

Name MANYON, ANDREA MD Name LIPPER, CHARLES 77 GOODELL STREET 77 GOODELL STREET

SUITE 310 SUITE 310 City-State-Zip: **BUFFALO NY 14203** City-State-Zip: **BUFFALO NY 14203** 

Title Title **DIRECTOR DIRECTOR** 

Name ZENILMAN, MICHAEL E MD Name THAYER SCATES, JAMIE

77 GOODELL STREET 77 GOODELL STREET Address Address **SUITE 310 SUITE 310** 

**BUFFALO NY 14203 BUFFALO NY 14203** City-State-Zip:

Title RESIDENT DIRECTOR

Name BEVINS, STEVEN 58 EAST VIEW LANE Address

SUITE 2

BARRE VT 05642 City-State-Zip:

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/11/2023 SIGNATURE: MARK LASTNER PRESIDENT