## **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

Electronic Signature of Registered Agent

Date

FILED Apr 11, 2023

Secretary of State

9619183501CC

Authorized Person(s) Detail:

Title PRESIDENT Title VP, SECRETARY

Name LASTNER, MARK Name BEATA, BIERNACKA

Address 77 GOODELL STREET Address 77 GOODELL STREET

SUITE 310 SUITE 310

0011231

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

Title DIRECTOR, CHAIRMAN Title TREASURER

Name MANYON, ANDREA MD Name LIPPER, CHARLES

Address 77 GOODELL STREET Address 77 GOODELL STREET

SUITE 310 SUITE 310

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

Title DIRECTOR Title DIRECTOR

Name ZENILMAN, MICHAEL E MD Name THAYER SCATES, JAMIE

Address 77 GOODELL STREET Address 77 GOODELL STREET

SUITE 310 SUITE 310

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

Title RESIDENT DIRECTOR
Name BEVINS, STEVEN
Address 58 EAST VIEW LANE

Address 58 EAST VIEW LANE

SUITE 2

City-State-Zip: BARRE VT 05642

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.

SIGNATURE: MARK LASTNER PRESIDENT 04/11/2023