

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1092

0609069 AB

DOCUMENT # 616873

1. Entity Name
FLORIDA RISK SPECIALISTS, INC.



FILED

03 APR 29 PM 5: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
100 NORTH TAMPA ST
SUITE 1840
TAMPA FL 33602
US

Mailing Address
70 PINE STREET
ATTN E M TUCK
NEW YORK NY 10270
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1910246

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

03

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S
NAME TUCK, ELIZABETH M.
STREET ADDRESS 70 PINE ST
CITY-ST-ZIP NEW YORK NY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME MCFATE, CAROL A
STREET ADDRESS 70 PINE STREET
CITY-ST-ZIP NEW YORK NY 10270 ☒ Delete

TITLE Bensinger, Steven J.
NAME 70 Pine Street
STREET ADDRESS New York, NY 10270
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE D
NAME KELLEY, KEVIN H
STREET ADDRESS 200 STATE ST.
CITY-ST-ZIP NEW YORK NY 10270 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 100017350331 ☐ Change ☐ Addition

TITLE PD
NAME KELLY, SHAUN
STREET ADDRESS 200 STATE STREET
CITY-ST-ZIP BOSTON MA 02105 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VSG
NAME RIVLIN, RACHEL
STREET ADDRESS 200 STATE ST.
CITY-ST-ZIP BOSTON MA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME ANSELMO, NICHOLAS
STREET ADDRESS 200 STATE STREET
CITY-ST-ZIP BOSTON MA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/03 (212) 770-7000

Date

Daytime Phone #

CR2E034 (10/02)

20f2



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 073352 4320171

AUTHORIZATION : *Patricia Piquero*

COST LIMIT : \$ 150.00

ORDER DATE : April 29, 2003

ORDER TIME : 11:20 AM

ORDER NO. : 073352-190

CUSTOMER NO: 4320171

CUSTOMER: Ms. Nancy Wong
American International Group,
30th Floor, 70 Pine Street
- Corporate
New York, NY 10270

RECEIVED
03 APR 29 PM 4:38
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: FLORIDA RISK SPECIALISTS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea-EXT#1114

EXAMINER'S INITIALS: _____