2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE:

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Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 23, 2002 8:00 am Secretary of State DOCUMENT # 827152 1. Entity Name 05-23-2002 90044 028 ***150.00 RISCORP NATIONAL INSURANCE COMPANY Principal Place of Business Mailing Address 1924 SOUTH OSPREY AVENUE 1924 SOUTH OSPREY AVENUE SUITE 202 SUITE 202 SARASOTA FL 34239 SARASOTA FL 34239 US US 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 44-0156575 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) CAPITOL BLDG. 4 TALLAHASSEE FL 32399 City Zip Code FL 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. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Delete CR2E034 (9/01) TITLE Change TITLE ☐ Addition mcCurdy Teffrey R. 1924 South Osprey Are, Suite 2023 NAME MCCURDY, JEFFREY R NAME STREET ADDRESS 1924 SOUTH OSPREY AVENUE, SUITE 202 STREET ADDRESS Sarasota, FL 34299 CITY-ST-ZIE CITY-ST-ZIP SARASOTA FL 34239 TITLE DS ☐ Delete TITLE Change NAME NAME BUTTNER, EDWARD W IV STREET ADDRESS STREET ADDRESS 1924 SOUTH OSPREY AVENUE, SUITE 202 CITY-ST-7IP CITY-ST-ZIP SARASOTA FL 34239 TITLE ☐ Delete TITLE Change Addition NAME HAMMOCK, MICHAEL STREET ADDRESS STREET ADDRESS 1924 SOUTH OSPREY AVENUE, SUITE 202 CITY-ST-ZIP CITY-ST-7IE Sarasota FL 34239 ☐ Delete TITLE ☐ Change ☐ Addition NAME SALSER, KEILY G STREET ADDRESS STREET ADDRESS 1924 SOUTH OSPREY AVENUE, SUITE 202 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34239 TITLE ☐ Delete TITLE Change ☐ Addition NAMÉ SAIKALEY, JASON E NAME STREET ADDRESS STREET ADDRESS 1924 SOUTH OSPREY AVENUE, SUITE 202 CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34239 DPT TITLE Delete TITLE ☐ Addition Randal D. Saker NAME SALSER, RANDAL D NAME 1924 S. Osprey Ave. Suite 2027 STREET ADDRESS 1924 SOUTH OSPREY AVENUE, SUITE 202 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ISARASOTA FL 34239 Sarasota, FL 13. 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 11 or Block 12 if

attachment #

827/52

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ADDITIONAL DIRECTORS FOR RISCORP NATIONAL INSURANCE COMPANY

D Louis V. Sicilian 1924 South Osprey Avenue, Suite 202 Sarasota, FL 34239

D
Linda D. Gardner
1924 South Osprey Avenue, Suite 202
Sarasota, FL 34239

D Richard W. Stobe, Jr. 1924 South Osprey Avenue, Suite 202 Sarasota, FL 34239