


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2008 APR 22 PM 4: 02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F05000004490 1. Entity Name A.I. RISK SPECIALISTS INSURANCE, INC.	
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Principal Place of Business 100 SUMMER STREET BOSTON, MA 02110 US	Mailing Address 70 PINE STREET, 30TH FLOOR NEW YORK, NY 10270 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State Zip	City & State Zip	Country	Country
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04012008 Chg-P CR2E034 (12/06)

4. FEI Number 13-4125003	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 retaining) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POWER, MATTHEW F 100 SUMMER STREET BOSTON, MA 02110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000125126870 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLY, SHAUN E 100 SUMMER STREET BOSTON, MA 02110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLY, KEVIN H 100 SUMMER STREET BOSTON, MA 02110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILLET, JOHN G 100 SUMMER STREET BOSTON, MA 02110 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Elizabeth M. Tuck 70 Pine Street, 30th floor New York, NY 10270 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANSELMO, NICHOLAS E 100 SUMMER STREET BOSTON, MA 02110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PARIS, STEPHEN J 100 SUMMER STREET BOSTON, MA 02110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Elizabeth M. Tuck, Secretary  4/1/08 212-770-7000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# Directors/Officers Report

As of April 01, 2008

## A.I. Risk Specialists Insurance, Inc.

### Directors

**Kevin Hugh Kelley**

*Director*

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

**Shaun Everett Kelly**

*Director*

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

**Matthew F. Power**

*Director*

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

### Officers

**Matthew F. Power**

*President*

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

## Directors/Officers Report

As of April 01, 2008

### A.I. Risk Specialists Insurance, Inc.

#### **Shaun Everett Kelly**

***Chief Executive Officer***

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

#### **Nicholas Edward Anselmo**

***Executive Vice President***

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

#### **David Andrew Jordan**

***Senior Vice President***

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

#### **Stephen Joel Paris**

***Senior Vice President***

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

#### **Armand George Pepin**

***Senior Vice President***

Primary Address

## Directors/Officers Report

As of April 01, 2008

### A.I. Risk Specialists Insurance, Inc.

Connell Corporate Center 1  
Connell Drive  
Suite 2100  
Berkeley Heights, New Jersey 07922 (United States)

#### **Bernard Peter Beauvais**

***Vice President***

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

#### **James A. Crain**

***Assistant Vice President***

Primary Address

100 Summer Street  
F19  
Boston, Massachusetts 02110 (United States)

#### **Daniel L. Haskell**

***Assistant Vice President***

Primary Address

100 Summer Street  
Floor 30  
Boston, Massachusetts 02110 (United States)

#### **Melissa U. Meserve**

***Assistant Vice President***

Primary Address

100 Summer Street  
Boston, Massachusetts 02110 (United States)

## Directors/Officers Report

As of April 01, 2008

### A.I. Risk Specialists Insurance, Inc.

**Stephen Joel Paris**

***General Counsel***

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

**Elizabeth Margaret Tuck**

***Secretary***

Primary Address

American International Group, Inc.  
70 Pine Street  
New York, New York 10270 (United States)

**Stephen John Andrick**

***Assistant Secretary***

Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

**Amy Marie Cinquegrana**

***Assistant Secretary***

Primary Address

American International Group, Inc.  
70 Pine Street  
New York, New York 10270 (United States)

**Patricia V. Craig**

***Assistant Secretary***

Primary Address



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 536263 4320171

AUTHORIZATION :

*[Handwritten Signature]*

COST LIMIT : \$ 150.00

ORDER DATE : April 20, 2008

ORDER TIME : 9:54 AM

ORDER NO. : 536263-210

CUSTOMER NO: 4320171

ANNUAL REPORT FILING

NAME: A.I. RISK SPECIALISTS  
INSURANCE, INC. FL 2008 AR

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Matthew Young - Ext. 2962

EXAMINER'S INITIALS: \_\_\_\_\_

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03 APR 22 PM 2:46  
DIVISION OF REVENUE  
TALLAHASSEE, FL 32304

## Directors/Officers Report

As of April 01, 2008

### A.I. Risk Specialists Insurance, Inc.

Audubon Indemnity Company  
4150 South Sherwood Forest Boulevard  
Baton Rouge, Louisiana 70816 (United States)

#### **Kevin Robert Miller**

##### ***Assistant Secretary***

###### Primary Address

American International Entertainment, Inc.  
100 Summer Street  
Boston, Massachusetts 02109 (United States)

#### **Victoria L. Webb**

##### ***Assistant Secretary***

###### Primary Address

American International Group, Inc.  
100 Summer Street  
Boston, Massachusetts 02109 (United States)

#### **John Mathew Artesani**

##### ***Treasurer***

###### Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)

##### ***Comptroller***

###### Primary Address

Lexington Insurance Company  
100 Summer Street  
Boston, Massachusetts 02110 (United States)