

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000061977 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0381

Prom:

Account Name : C T CORFORATION SYSTEM

Account Number : PCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5926 R-8 PM 12: 21

FOREIGN PROFIT/NONPROFIT CORPORATION

Risk Planners, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$3,520.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

3/8/2006

8508785926

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO	TRANSACT
RUSINESS IN ET AIDIN A	

		AN WELL WAS CONTRACTED BY	
		A STATUTES, THE FOLLOWING IS SUBMITTED TO	311 90
Risk Planners, Inc.			>o
(Enter name of corp	ocration; trust include "INCORPORATI)," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"	-8 PHI2:
(If name nnavailabl	e in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florids	\mathcal{D}
Minnesota	•	a 41-0955617	
	der the law of which it is incorporated)	(FEI number, if applicable)	
10/13/1969		5. Perpetual	
(Data of	'incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	-
20032	1つかつる		
(Purpose(s) o	(Current mailing a dty, Group Health, Life Insurance f corporation authorized in home state of ddram of Florida registered agent: ()	r country to be carried out in state of Florida)	-
(Purpose(s) o	dty, Group Health, Life Insurance f corporation authorized in home state of	r country to be carried out in state of Florida)	-
(Purpose(s) o Name and <u>streat a</u> Name:	alty, Group Health, Life Insurance f corporation authorized in home state of didress of Florida registered agent: ()	r country to be carried out in state of Florida)	-
(Purpose(s) o Name and street a Name:	dty, Group Health, Life Insurance f corporation authorized in home state of didress of Florida registered agent: () C T Corporation System	r country to be carried out in state of Florida)	-
(Purpose(s) o Name and strest a Name:	dty, Group Health, Life Insurance f corporation authorized in home state of cidress of Florida registered agent: () C T Corporation System 1200 South Pine Island Road	r country to be carried out in state of Florida) P.O. Box. <u>NOT</u> acceptable)	-
(Purpose(s) o Name and streat a Name: ffice Address: Registered ages sving been named stignated in this ap	alty, Group Health, Life Insurance f corporation authorized in home state of cideran of Florida registered agent: () C T Corporation System 1200 South Pine Island Road Plantation (City) at's acceptance: as registered agent and to accept so plication, I hereby accept the appoin	r country to be carried out in state of Florida) P.O. Box. NOT acceptable) , Florida	acity. I

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

03/08/2086 12:05 8508785926

A. DIRECTORS
Chairman: See Attached List
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: See Attachod List
Address:
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Signment of Dipoper or Officer listed in number 12 of the application)
14. Warren E. Singhson, Assistant Sectetary
(Typed or printed name and capacity of person signing application)

Directors / Officers Report

8508785926

As of 02/16/2006

Risk Planners, Inc.

Directors

David L. Boehnen

Director

End Date:

Primary Address:

11840 Valley View Road

Eden Prairie, MN 55344

Keith D. Cody

Director

End Date:

Primary Address:

11840 Valley View Road

Eden Prairie, MN 55344

Louis S. Tesler

Director

End Date:

Primary Address:

11840 Valley View Road

Eden Prairie, MN 55344

Officers

Keith D. Cody

President

End Date:

Primary Address:

11840 Valley View Road

Eden Prairio, MN 55344

David L. Boehnen

Executive Vice President

End Date:

Primary Address:

11840 Valley View Road Eden Prairie, MN 55344

Sherry M. Smith

Senior Vice President, Finance and Treasurer

End Date:

Primary Address:

11840 Valley View Road

Eden Prairie, MN 55344

John P. Breedlove

End Date:

Vice President and Secretary

Primary Address:

11840 Valley View Road

Eden Prairie, MN 55344

Karen T. Borman

Vice President

End Date:

Primary Address:

11840 Valley View Road

Eden Prairie, MN 55344

Stephen P. Kilgriff

Vice President

Directors / Officers Report

As of 02/16/2006

Risk Planners, Inc.

End Date:

Primary Address:

11840 Valley View Road Eden Prairie, MN 55344

James L. Stoffel

End Date:

Primery Address:

Vice President

11840 Valley View Road Eden Prairie, MN 55344

Louis S. Tesler

End Date:

Primary Address:

Vice President

11840 Valley View Road Eden Prairie, MN 55344

John K. Barber

Assistant Secretary

End Date:

Primary Address:

1003 Belibrook Avenue

Xenia, OH 45385

William C. Bohrer

End Date:

Assistant Secretary

Primary Address:

7400 95th St.

Pleasant Prairie, Wisconsin 53158

Robert M. Cook

End Date:

Assistant Secretary

Primary Address:

1525 East D Street Tacoma, WA 98421

Trevor Gartner

Assistant Secretary

End Date:

Primary Address:

4613 Ashglen Circle

Collierville, TN 38017

Stephanie Y. Jewett

End Date:

Assistant Secretary

Primary Address: 11840 Valley View Road Eden Prairie, MN 55344

Denise T. Kalan

Assistant Secretary

End Date:

Primary Address:

19 Shelly Way

Monongahela, PA 15063

Kathryn Lesson

Assistant Secretary

Directors / Officers Report

As of 02/16/2006

Risk Planners, Inc.

End Date:

Primary Address:

351 Thornton Rd, Ste 109 Lithia Springs, GA 30122

Jerry Novacek

Assistant Secretary

End Date:

Primary Address:

3501 12th Ave N Pargo, ND 58108

Warren E. Simpson

End Date:

Assistant Secretary

Primary Address:

11840 Valley View Road

Eden Prairie, MN 55344

Richard G. Buzicky

Assistant Secretary

End Date:

Primary Address:

Risk Planners of Illinois, Inc. 2611 North Lincoln Ave.

Urbena, IL 61801

Kent E. Hasse

Assistant Secretary

End Date:

Primary Address:

11840 Valley View Road

Eden Prairie, MN 55344

Darlene E. Hauschildt

End Date:

Assistant Secretary

Primary Address:

11840 Valley View Road Eden Prairie, MN 55344

Paul H. Zander

Assistant Secretary

End Date:

Primary Address:

PO Box 240

Minnespolis, MN 55440

8508785926



SECRETARY OF STATE

Certificate of Good Standing

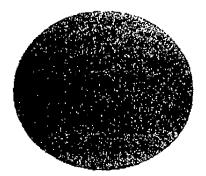
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Risk Planners, Inc.

Date Formed: 10/13/1969

Chapter Governed By: 302A

This certificate has been issued on 03/07/05.



Mary Kif