

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004541

FILED
Apr 20, 2012
Secretary of State

Entity Name: RISK SPECIALISTS COMPANIES INSURANCE AGENCY, INC.

Current Principal Place of Business:

99 HIGH STREET
BOSTON, MA 02110

New Principal Place of Business:

Current Mailing Address:

175 WATER STREET
18TH FLOOR
NEW YORK, NY 10038

New Mailing Address:

FEI Number: 22-2174788 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: PUGLIESE, VINCENT N
Address: 99 HIGH ST
City-St-Zip: BOSTON, MA 02110

Title: S
Name: KENT, TANYA E
Address: 175 WATER STREET
City-St-Zip: NEW YORK, NY 10038

Title: T
Name: SULLIVAN, KEVIN A
Address: 100 SUMMER STREET
City-St-Zip: BOSTON, MA 02110

Title: VP
Name: LOWMAN, JOSEPHINE B
Address: ONE NEW YORK PLAZA, 17TH FLOOR
City-St-Zip: NEW YORK, NY 10004

Title: D
Name: ANSELMO, NICHOLAS E
Address: 99 HIGH ST
City-St-Zip: BOSTON, MA 02110

Title: D
Name: BRESNAHAN, DAVID J
Address: 99 HIGH ST
City-St-Zip: BOSTON, MA 02110

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: TANYA E KENT

S

04/20/2012

Electronic Signature of Signing Officer or Director

Date