

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003224

FILED
Mar 31, 2011
Secretary of State

Entity Name: LANCET INDEMNITY RISK RETENTION GROUP, INC.

Current Principal Place of Business:

5430 WEST SAHARA AVENUE
LAS VEGAS, NV 89146

New Principal Place of Business:

Current Mailing Address:

C/O RISK SERVICES
1800 SECOND STREET, SUITE 909E
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 26-1479165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGERS, MICHAEL T
1800 SECOND STREET, SUITE 909E
SARASOTA, FL 34236 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: DP
Name: LURIA, WILLIAM L
Address: 2727 W. MARTIN LUTHER KING JR. STE 500
City-St-Zip: TAMPA, FL 33607

Title: DV
Name: TISDEL, MARK A
Address: 1520 SOUTH LAPEER ROAD, #120
City-St-Zip: LAKE ORION, MI 48360

Title: DC
Name: MANISCALCO, BENEDICT
Address: 4730 HABANA AVENUE, SUITE 201
City-St-Zip: TAMPA, FL 33614

Title: D
Name: ERICKSON, VICTORIA
Address: 5430 W. SAHARA AVENUE
City-St-Zip: LAS VEGAS, NV 89146

Title: T
Name: MANISCALCO, ANTHONY L
Address: 2810 W. ST. ISABEL STREET, SUITE 201
City-St-Zip: TAMPA, FL 33607

Title: S
Name: RODRIGUEZ, SALVATORE
Address: 2810 W. ST. ISABEL STREET, #201B
City-St-Zip: TAMPA, FL 33607

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: ANTHONY MANISCALCO

T

03/31/2011

Electronic Signature of Signing Officer or Director

Date