# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 15, 2011**
**Secretary of State**

DOCUMENT# F10000000213

**Entity Name:** DELAWARE PROFESSIONAL INSURANCE COMPANY, RISK RETENTION GROUP

**Current Principal Place of Business:**

906 GREENHILL AVENUE
WILMINGTON, DE 19805

**New Principal Place of Business:**

**Current Mailing Address:**

906 GREENHILL AVENUE
WILMINGTON, DE 19805

**New Mailing Address:**

**FEI Number: 51-0326858** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DSV
Name: GORDON, DAVID I
Address: 845 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: DP
Name: CORBALLIS, BEN C
Address: 906 GREENHILL AVENUE
City-St-Zip: WILMINGTON, DE 19805

Title: D
Name: DEMEO, GREGORY W
Address: 4745 OGLETOWN-STANTON ROAD #106
City-St-Zip: NEWARK, DE 19713

Title: D
Name: EDELL, STEVEN
Address: J24 OMEGA DRIVE
City-St-Zip: NEWARK, DE 19713

Title: D
Name: NITOWSKI, LEONARD A
Address: 1081 SQUIRE CHENEY DRIVE
City-St-Zip: WESTCHESTER, PA 19382

Title: DTV
Name: HERSHEY, STEPHEN L
Address: 475 OGLETOWN-STANTON ROAD #225
City-St-Zip: NEWARK, DE 19713

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: DAVID I GORDON DSV 02/15/2011

Electronic Signature of Signing Officer or Director — Date