

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005601

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** ALLIANCE OF NONPROFITS FOR INSURANCE, RISK RETENTION GROUP, INC.

**Current Principal Place of Business:**

333 FRONT STREET  
SUITE 200  
SANTA CRUZ, CA 95060

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 8546  
SANTA CRUZ, CA 95061

**New Mailing Address:**

**FEI Number:** 06-1555320

**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: PCEO  
Name: DAVIS, PAMELA E  
Address: 333 FRONT STREET #200  
City-St-Zip: SANTA CRUZ, CA 95060

Title: D  
Name: DAVIS, PAMELA E  
Address: 333 FRONT STREET #200  
City-St-Zip: SANTA CRUZ, CA 95060

Title: D  
Name: JONES, WILSON M  
Address: 1828 L STREET NW #900  
City-St-Zip: WASHINGTON, DC 20036

Title: T  
Name: ADAY, KIMBERLY J  
Address: 333 FRONT STREET #200  
City-St-Zip: SANTA CRUZ, CA 95060

Title: SD  
Name: RICHARD, STEVEN B  
Address: 61 DUKE STREET  
City-St-Zip: NORTHUMBERLAND, PA 17857

Title: D  
Name: BACON, R. LAWRENCE  
Address: 27175 MEADOWS ROAD  
City-St-Zip: CARMEL, CA 93923

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAMELA E DAVIS

PCEO

03/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date