

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 25 AM 8:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000004103 (8)

1. Corporation Name

STERLING RISK MANAGEMENT SERVICES, INC.

Principal Place of Business

Mailing Address

100 NORTH PARKWAY
WORCESTER MA 01605

100 NORTH PARKWAY
WORCESTER MA 01605

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/07/1993

3a. Date of Last Report

05/23/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

22

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

29

Country

30

4. FEI Number

04-3166066

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MAY, J. BARRY
STREET ADDRESS	100 CENTURY DR.
CITY - ST - ZIP	WORCESTER MA 01606-1245
TITLE	D
NAME	O'BRIEN, JOHN F
STREET ADDRESS	440 LINCOLN ST.
CITY - ST - ZIP	WORCESTER MA 01653
TITLE	D
NAME	RICHARDSON, JAMES F
STREET ADDRESS	100 NORTH PARKWAY
CITY - ST - ZIP	WORCESTER MA 01605
TITLE	D
NAME	ROVITO, JOSEPH V
STREET ADDRESS	100 NORTH PARKWAY
CITY - ST - ZIP	WORCESTER MA 01605
TITLE	DP
NAME	RUPLEY, THEODORE J
STREET ADDRESS	100 NORTH PARKWAY
CITY - ST - ZIP	WORCESTER MA 01605
TITLE	D
NAME	SUTTON, JOHN E
STREET ADDRESS	330 S. RANDOLPHVILLE ROAD
CITY - ST - ZIP	PISCATAWAY NJ 08855

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

*See
Attached
list*

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William Statiloff
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/95

(508) 855-3755

F930000 4108

STERLING RISK MANAGEMENT SERVICES, INC.

Directors

- †† Christopher C. Brown
- † James F. Richardson
- † Joseph V. Rovito
- †† Phillip E. Soule
- †† William G. Whitehead

Officers

- †† President - Phillip J. Soule
- †† Vice President - William G. Whitehead
- †† Vice President & Treasurer - Edward J. Parry, III
- †† Secretary - William J. Cahill, Jr.
- †† Assistant Secretary - Sheila B. St. Hilaire

†† Assistant Treasurers

Henry P. St. Cyr
Edward A. Ostrout
William K. Fain

* Address

100 North Parkway
Worcester, MA 01605

†† Address

40 Lincoln Street
Worcester, MA 01653