

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006222

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** NORTH AMERICAN RISK SERVICES, INC.

**Current Principal Place of Business:**

240 EAST CENTRAL PARKWAY  
SUITE 4010  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

240 EAST CENTRAL PARKWAY  
SUITE 4010  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

**FEI Number:** 13-3901415

**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 32301 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: P  
Name: RURYK, ROBERT  
Address: 240 EAST CENTRAL PARKWAY, SUITE 4010  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S  
Name: BERNARDO, JAMES M  
Address: 240 EAST CENTRAL PARKWAY, SUITE 4010  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: T  
Name: MCCULLY, JOHN M  
Address: 240 EAST CENTRAL PARKWAY, SUITE 4010  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D  
Name: AYERS, CHERYL W  
Address: 240 EAST CENTRAL PARKWAY, SUITE 4010  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D  
Name: FITZPATRICK, STEPHEN T  
Address: 240 EAST CENTRAL PARKWAY, SUITE 4010  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D  
Name: BURRELL, WALTER P  
Address: 3 BUTTONWOOD DRIVE  
City-St-Zip: SHEWSBURY, NJ 07702

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: JAMES M. BERNARDO

S

04/24/2012

Electronic Signature of Signing Officer or Director

Date