

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 NOV -3 AM 10:23

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F97000006441

1. Corporation Name

RISK MANAGEMENT ALTERNATIVES, INC.

Principal Place of Business

Mailing Address

~~4450 RIVER GREEN PARKWAY, STE 200~~
~~DULUTH GA 30096~~

~~4450 RIVER GREEN PARKWAY, STE 200~~
~~DULUTH GA 30096~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

2675 Breckinridge Blvd.

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

2675 Breckinridge Blvd.

Suite, Apt. #, etc.

City & State

Duluth, GA

Zip

30096

Country

US

City & State

Duluth, GA

Zip

30096

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

12/08/1997

5. FEI Number

41-1880612

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PCEO	CUNNINGHAM, DENNIS	4450 RIVER GREEN PARKWAY, STE 2 <u>2675 Breckinridge Blvd.</u>	DULUTH GA 30096
D	CANFIELD, PHILIP A	2220 SOUTH BUSSE ROAD	MT PROSPECT IL 60056
D	RAUNER, BRUCE V	2220 SOUTH BUSSE ROAD	MT PROSPECT IL 60056
EVP	BAUER, TIMOTHY J	4450 RIVER GREEN PARKWAY, STE 2 <u>2675 Breckinridge Blvd.</u>	DULUTH GA 30096
VAS	HEUSEL, ALICE G	4450 RIVER GREEN PARKWAY, STE 2 <u>2675 Breckinridge Blvd.</u>	DULUTH GA 30096
ST	CONNOLLY, JOSEPH	4450 RIVER GREEN PARKWAY, STE 2 <u>2675 Breckinridge Blvd.</u>	DULUTH GA 30096

8. Name and Address of Current Registered Agent

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

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Dale W. Morris

DALE W. MORRIS
ASSISTANT VICE PRESIDENT

REGISTERED AGENT MUST SIGN

Date

10-20-03

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Signature of Officer or Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/16/03 (770) 925-5000

CR2E040 (7/03)



RISK MANAGEMENT
ALTERNATIVES

October 23, 2003

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Reinstatement of Risk Management Alternatives, Inc.
Document# F97000006441

Dear Sir or Madam:

Please waive the reinstatement fee for Risk Management Alternatives, Inc. The company relocated to a new location in April 2002 and did not receive the two prior uniform business report notices. Risk Management Alternatives, Inc.'s new address is as follows:

2675 Breckinridge Blvd.
Duluth, GA 30096

Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in cursive script that reads "Alice Heusel".

Alice Gwyn Heusel
Sr. Vice President