

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90044 048 ***150.00

DOCUMENT # F98000000454

1. Entity Name

AVALON RISK MANAGEMENT, INC.



Principal Place of Business

10705 NW 33RD STREET
STE 120
MIAMI FL 33172
US

Mailing Address

3701 ALGONQUIN RD-
STE 900
ROLLING MEADOWS IL 60008

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

150 NORTHWEST POINT BLVD.

Suite, Apt. #, etc.

4TH FLOOR

City & State

City & State

ELK GROVE VILLAGE, IL

Zip

Country

Zip

Country

60007

USA

4. FEI Number

36-4201541

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PUJOL, LESLIE
10705 NW 33RD STREET
SUITE 1200
MIAMI FL 33172

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BHOJWANI, GARY C
3701 ALGONQUIN RD STE 900
ROLLING MEADOWS IL 60008 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
GARY BHOJWANI
36 W 705 W RIDGEWOOD LN.
ST CHARLES, IL 60175 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
HRUBY, DENISE L
3701 ALGONQUIN ST 900
ROLLING MEADOWS IL 60008 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY
DENISE L. HRUBY
611 NATHAN LATTIN LANE
SYCAMORE, IL 60178 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
JACKSON, WILLIAM S
3701 ALGONQUIN RD STE 900
ROLLING MEADOWS IL 60008 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR/TREASURER
SHAWN JACKSON
1495 THE LINKS DRIVE
DANVILLE, ON L6M 2P2 CANADA ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
STAR, WILLIAM G
3701 ALGONQUIN RD STE 900
ROLLING MEADOWS IL 60008 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
WILLIAM G. STAR
4470 TUCANA CT. PENTHOUSE 5
MISSISSAUGA, ON L5R 3K8 CANADA ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WOLLNEY, SCOTT
3701 ALGONQUIN RD STE 900
ROLLING MEADOWS IL 60008 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
SCOTT D. WOLLNEY
2437 SWAINWOOD DR.
GLENVIEW, IL 60025 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Denise L. Hruby Denise L. Hruby

3/5/04

Date

847-700-8186

Daytime Phone #