

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 26, 2001 08:00 AM**
Secretary of State**DOCUMENT # K91286**1. Entity Name
RISCORP SERVICES, INC.**Principal Place of Business**ONE SARASOTA TOWER
2 N TAMIAMI TRL, STE 608
SARASOTA
34236
US

FL

Mailing AddressONE SARASOTA TOWER
2 N TAMIAMI TRL, STE 608
SARASOTA
34236
US

FL

2. Principal Place of Business

1924 SOUTH OSPREY AVENUE

3. Mailing Address

1924 SOUTH OSPREY AVENUE

Suite, Apt. #, etc.

SUITE 202

Suite, Apt. #, etc.

SUITE 202

City & State

SARASOTA

FL

City & State

SARASOTA

FL

Zip

34239

Country

US

Zip

34239

Country

US

4. FEI Number**65-0166503****Applied For**☐ Not Applicable**5. Certificate of Status Desired**☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentVAUGHAN-BIRCH L. NORMAN
720 S. ORANGE AVE.

SARASOTA

FL

34236

US

7. Name and Address of New Registered Agent**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

04/26/2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BUTTNER EDWARD WIV	
STREET ADDRESS	2 N. TAMIAMI TRAIL #608	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GOODE SEDDON J	
STREET ADDRESS	2 N TAMIAMI TRL, STE 608	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GREENE GEORGE EIII	
STREET ADDRESS	2 N TAMIAMI TRL, STE 608	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	D	<input type="checkbox"/> Delete
NAME	REVELL WALTER L	
STREET ADDRESS	2 N TAMIAMI TRL, STE 608	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	PT	<input type="checkbox"/> Delete
NAME	RIEHMANN WALTER E	
STREET ADDRESS	2N TAMIAMI TRL, STE 608	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCURDY JEFFREY R	
STREET ADDRESS	1924 SOUTH OSPREY AVENUE, SUITE 202	
CITY-ST-ZIP	SARASOTA FL 34239	
TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRIFFIN WILLIAM D	
STREET ADDRESS	1924 SOUTH OSPREY AVENUE, SUITE 202	
CITY-ST-ZIP	SARASOTA FL 34239	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeffrey R. McCurdy

VPST

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)