

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90065 021 \*\*\*150.00

0690609

**DOCUMENT # P04977**

1. Entity Name

**MANAGED ACCESS RISK CORPORATION**

Principal Place of Business

**7301 NORTH 16TH STREET, SUITE #201  
PHOENIX AZ 85020  
US**

Mailing Address

**7301 NORTH 16TH STREET, SUITE #201  
PHOENIX AZ 85020  
US**

2. Principal Place of Business

**7301 N. 16th Street  
Suite, Apt. #, etc.  
Suite 201**

3. Mailing Address

**7301 N. 16th Street  
Suite, Apt. #, etc.  
Suite 201**

City &amp; State

**Phoenix, AZ**

City &amp; State

**Phoenix, AZ**

Zip

**85020**

Country

**USA**

Zip

**85020**

Country

**USA**4. FEI Number **62-1176288**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

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)

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	BOGLE, GEORGE E	916 CAPITAL OF TEXAS HWY S	AUTSTINE TX 78746	<input type="checkbox"/>
S	SARA, WENDY	7301 N 16 ST #201	PHOENIX AZ 85020	<input type="checkbox"/>
CFOT	WEINBERGER, RICHARD	916 SOUTH CAPITAL OF TEXAS HIGHWAY	AUSTIN TX 78746	<input type="checkbox"/>
VPD	BOGLE, G. MICHAEL	7301 N 16 STREET #201	PHOENIX AZ 85020	<input type="checkbox"/>
P	MCDERMOTT, TOM	916 SOUTH CAPITAL OF TEXAS HWY	AUSTIN TX 78746	<input type="checkbox"/>
VP	MILLS, KELLY	7301 N. 16TH ST., STE. 201	PHOENIX AZ 85020	<input type="checkbox"/>

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)