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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P07087 (0)**
1. Corporation Name
RISK INNOVATIONS SERVICE & CONSULTING, INC.



Principal Place of Business: **9300 ARROWPOINT BLVD., M.S. 2116
CHARLOTTE NC 28273-8136**
Mailing Address: **PO BOX 1000
CHARLOTTE NC 28201-1000
US**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/13/1985	3a. Date of Last Report 07/17/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 13-3242627		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent
**SCISCIANI, WILLIAM C
4350 W CYPRESS STR
STE 1000
TAMPA FL 33607**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when re-stating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	COO <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIERSAPH, RICHARD W.	1.2 NAME	
STREET ADDRESS	9300 ARROWPOINT BLVD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	CHARLOTTE NC	1.4 CITY - ST - ZIP	
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCDONALD, JAMES DAVID	2.2 NAME	
STREET ADDRESS	9300 ARROWPOINT BLVD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	CHARLOTTE NC	2.4 CITY - ST - ZIP	
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHEELER, JOYCE W	3.2 NAME	
STREET ADDRESS	9300 ARROWPOINT BLVD.	3.3 STREET ADDRESS	
CITY - ST - ZIP	CHARLOTTE NC	3.4 CITY - ST - ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN, DAVID H	4.2 NAME	
STREET ADDRESS	9300 ARROWPOINT BLVD.	4.3 STREET ADDRESS	
CITY - ST - ZIP	CHARLOTTE NC	4.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MENDELSON, ROBERT V	5.2 NAME	
STREET ADDRESS	9300 ARROWPOINT BLVD.	5.3 STREET ADDRESS	
CITY - ST - ZIP	CHARLOTTE NC	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joyce W. Wheeler **Joyce W. Wheeler** 01/24/97 704/522-2739
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day in Month Year

01/27/1997

Directors and Officers
Risk Innovations Service & Consulting, Inc.

DIRECTORS:

Robert Victor Mendelsohn	Chairman
Charles Ronald Riley	Director
Joyce Wethington Wheeler	Director

OFFICERS:

James David McDonald	President
Richard W. Liersaph	Chief Operating Officer
David Henry Martin	Vice President
Joyce Wethington Wheeler	Secretary-Treasurer