

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000007271

FILED
Mar 25, 2010
Secretary of State

Entity Name: HEALTHCARE PROFESSIONALS-RISK MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

2477 STICKNEY POINT RD., STE. 207B
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

2477 STICKNEY POINT RD., STE. 207B
SARASOTA, FL 34231

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COMPTON, JOHN M.
1819 MAIN ST., STE. 610
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: STUART, MICHAEL W.
Address: 2477 STICKNEY POINT RD., STE. 207B
City-St-Zip: SARASOTA, FL 34231

Title: D
Name: STUART, CINDY L.
Address: 2477 STICKNEY POINT RD., STE. 207B
City-St-Zip: SARASOTA, FL 34231

Title: D
Name: STUART, MICHAEL S.
Address: 2477 STICKNEY POINT RD., STE. 207B
City-St-Zip: SARASOTA, FL 34231

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL W. STUART

D

03/25/2010

Electronic Signature of Signing Officer or Director

Date