FILE NOW: FILING FEE AF	TER MAY 1 IS S	\$225.00
-------------------------	----------------	----------

PRÒFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

P20707

(6)

ROYAL SPECIAL RISKS INSURANCE COMPANY

110174	, <u>, , , , , , , , , , , , , , , , , , </u>								
Principal Place of Business Mailing Address				E ISETTOST DIS LISTE COUR FOURT AND	1)1 1001 010H D10H D10H B1DI		1 01011 1001		
P. O. BOX 1		9300 ARROWPOINT BLVD P. O. BOX 1000 CHARLOTTE NG 28201).				100 Day (100	· Dorod	
CHARLOTTE US	NC 20201	US			3. Dat	e Incorporated or Qualified 08/30/1988	3a. Date of Las	8/1995	1
		2a. Mailing Address			4. FEI	Number	1 00/00	Applie	d For
2. Principal Plac	ce of Business	26. Mailing Address			" , -	06-1125462	<u> </u>		pplicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Cei	tificate of Status Desired		.75 Addi	
22		27				C. O	F	ee Requi	
City & State		City & State			1 '	ction Campaign Financing st Fund Contribution	1 1	5.00 Ma dded to F	• 1
Zip	ZID Country ZIP Country			 -	8. This corporation has liability for intangible tax under s 199.032,				
24	25	29 30					□ No		
	9. Name and Address of Current	Registered Agent			10. Na	me and Address of New R	egistered Agent		
			81	Name					
THE IN	SURANCE COMMISSIONER		82	Street Ac	dress (P.O. I	Box Number is Not Acceptab	ole)		
)L BUILDING		83						
TALLA	HASSEE FL 32399		03						
			84	City			FL 85	Zip Cod	Je
11 Purcuant to	the provisions of Sections 607.0502	and 607.1508. Florida Statutes, th	he above-	named corp	coration subr	nits this statement for the pur	roose of changing	its registe	ered office
	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Section		by the con	poration's b	oard of direct	tors. I hereby accept the app	ointment as regist	ered agen	nt. Lam
	n, and accept the obligations of, Section)/1 007.0303, 1 10/10d Olditaros.							
SIGNATURE _	Signature, typed or printed name of registered agent a	and little if applicable (NOTE: R		ent signature req	urred when reinsta	ting)	DATE	OTODÓ	1
12.	OFFICERS AND		13.		AD	DITIONS/CHANGES TO OFF	-ICERS AND DIRE		Addition :
TITLE	CO	X DELETE	1. 1 TITLE		e e		[Olia	nye ∟	ROOMOI
NAME	MASTERS, LAURANCE E		1.2 NAME	l l	mplete				
STREET ADDRESS	9300 ARROWPOINT BLVD.		B	T ADDRESS	ψJ				
CHTY-ST-ZIP	CHARLOTTE NC	DELETE	14 CiTY- 2 1 Tille				[7] Cha	nge 🗀	Addition
TITLE	CPC	[] Detere	2 1 11100 2 2 NAME		Ö		<u></u>		
NAME !	MENDELSOHN, ROBERT V			T ADDRESS	8 8				
STREET ADDRESS	9300 ARROWPOINT BLVD.		2.4 CHTY-		for				
CITY - ST - ZIP	CHARLOTTE NC	[] DELETE	3 1 TITLE				☐ Cha	ange 🔲	Addition
TITLE	CS LOVOE W		3.2 NAME	1	list direct				
NAME	WHEELER, JOYCE W.			ET ADDRESS	Li				1
STREET ADDRESS	9300 ARROWPOINT BLVD.		3.4 CITY		ַק קַ	700001 <i>7</i> 4	12077	•	
CITY-ST-ZIP	CHARLOTTE NC	XX DELETE	4 1 TITLE		attached cers and	7000017 5 -04/24/96010 ***1400.00	157095 ^{ch}	ange 🔲	Addition "
NAME	D Watt, William G.		4.2 NAM	<u> </u>	g လ	***1400.00			
STREET ADDRESS	9300 ARROWPOINT BLVD.		4.3 STRE	ET ADDRESS	atta	:			-
CHY-ST-ZIP	CHARLOTTE NC		4.4 CHY	-ST-ZIP	•				
TITLE	C	☐ DELETE	5 1 TITU	F	the		Cha	ange 🔲	Addition]
NAME	PRESTOPINO, FRANK J.		5.2 NAM	E					
STREET ADDRESS	9300 ARROWPOINT BLVD.		5.3 STRE	ET ADDRESS	see				
CITY - ST - ZIP	CHARLOTTE NC		5.4 CITY	-ST-ZIP					3.4.000
TITLE	V	☐ DELETE	6 1 TITE	E	se		Ch.	ange [Addition
NAME	BUSHEY, GERALD B		62 NAM	F	is ta			Σ ^ν .	ુપ
STREET ADDRESS	9300 ARROWPOINT BLVD.		6.3 STRE	ET ADDRESS	Please slisting			- 4	·r `

CHY-ST-ZIP

CHARLOTTE NC

64 CITY-ST-ZIP

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/27/96 704/522-2739 Daytime Phone #

03/26/1996

Directors and Officers
Royal Special Risks Insurance Company

DIRECTORS:

Chairman Robert Victor Mendelsohn Terry Broderick Director Director James F. Noonan Director Frank James Prestopino Director Charles Ronald Riley Director Larry Gene Simmons Paul H. Stewman Director Director Joyce Wethington Wheeler

OFFICERS:

Robert Victor Mendelsohn

James F. Noonan
Gerald Blair Bushey
Elizabeth Jane McLaughlin
Archibald James Whyte, Jr.
Joyce Wethington Wheeler
Frank James Prestopino
Alan Edward Kaliski
Linda Y. Pettigrew

President and Chief Executive
Officer
Chief Investment Officer
Vice President
Vice President
Corporate Secretary
Comptroller
Appointed Actuary
Assistant Corporate Secretary