FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10:28

DOCUMENT # **S18260** (7)

1. Corporation Name
RISK RETENTION MANAGEMENT, INC.

Principal Place of Business	Mailing Address
2033 WOOD STREET SUITE 200 SARASOTA FL 34237	2033 WOOD STREET SUITE 200 SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/13/1990
3a. Date of Last Report: 02/10/1994

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 54-1511810 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MILLER JR, H LINCOLN
390 BOCA CIEGA PT BLVD. SOUTH
ST PETERSBURG FL 33708

10. Name and Address of New Registered Agent

81 Name: G. Wayne Harris
82 Street Address (P.O. Box Number is Not Acceptable): 7251 Plovers Way
83:
84 City: Sarasota FL 85 Zip Code: 34232

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: G Wayne Harris — 3-19-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandatory) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE		☐ Change ☐ Addition
NAME	HARRIS, G WAYNE	12 NAME		
STREET ADDRESS	7251 PLOVERS WAY	13 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	14 CITY-ST-ZIP		
TITLE	C	21 TITLE	C	☒ Change ☐ Addition
NAME	MILLER, H LINCOLN	22 NAME	H. LINCOLN MILLER	
STREET ADDRESS	390 BOCA CIEGA PT BLVD S	23 STREET ADDRESS	10 MORGAN ROAD	
CITY-ST-ZIP	ST PETERSBURG FL	24 CITY-ST-ZIP	HANOVER NH 03755	
TITLE	S	31 TITLE	S	☒ Change ☐ Addition
NAME	MILLER, MARGARET B	32 NAME	MARGARET B. MILLER	
STREET ADDRESS	390 BOCA CIEGA PT BLVD S	33 STREET ADDRESS	10 MORGAN ROAD	
CITY-ST-ZIP	ST PETERSBURG FL	34 CITY-ST-ZIP	HANOVER NH 03755	
TITLE	VP	41 TITLE	VP	☒ Change ☐ Addition
NAME	BYERS, KELLY K	42 NAME	KELLY K. BYERS	
STREET ADDRESS	1933 - 3RD AVE. W.	43 STREET ADDRESS	2033 WOOD STREET, SUITE 200	
CITY-ST-ZIP	BRADENTON FL	44 CITY-ST-ZIP	SARASOTA FL 34237	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
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)(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: Kelly K Byers — Kelly K Byers — 1/10/95 — (813) 957-3866
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0342030 CP