2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H16549

Entity Name: RISK MANAGEMENT ASSOCIATES, INC.

Current Principal Place of Business: 220 S. RIDGEWOOD AVENUE, SUITE 210

DAYTONA BEACH, FL 32114

Current Mailing Address:

220 S. RIDGEWOOD AVE.

DAYTONA BEACH, FL 32114 US

FEI Number: 59-2445801 Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

FILED Apr 06, 2018

Secretary of State

CC2337366678

Certificate of Status Desired: No

Officer/Director Detail :

Title **TREASURER** Title **PRESIDENT**

DALY, WILLIAM R. BROWN, P. BARRETT Name Name

220 S. RIDGEWOOD AVE. Address Address SIX CONCOURSE PARKWAY

SUITE 2300

EXECUTIVE VICE PRESIDENT

VICE PRESIDENT & SECRETARY

DAYTONA BEACH FL 32114 City-State-Zip: City-State-Zip: ATLANTA GA 30328

Title DIRECTOR

BROWN, P. BARRETT Name Name MONTGOMERY, MATTHEW

SIX CONCOURSE PARKWAY Address Address 220 S. RIDGEWOOD AVENUE. SUITE **SUITE 2300**

Title

Title

ATLANTA GA 30328

City-State-Zip: City-State-Zip: DAYTONA BEACH FL 32114

Title VICE PRESIDENT & ASSISTANT **SECRETARY**

Name LLOYD, ROBERT W. ROBINSON, ANTHONY Name

Address Address 220 S. RIDGEWOOD AVENUE. SUITE

220 S. RIDGEWOOD AVENUE. SUITE 210

DAYTONA BEACH FL 32114 City-State-Zip: DAYTONA BEACH FL 32114 City-State-Zip:

Title VΡ Title ٧P

WATTS, ANDREW Name Name LANNI, JAMES

220 S. RIDGEWOOD AVENUE. SUITE Address 220 S. RIDGEWOOD AVENUE. SUITE Address

210

City-State-Zip: DAYTONA BEACH FL 32114 City-State-Zip: DAYTONA BEACH FL 32114

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: ANTHONY ROBINSON

VICE PRESIDENT & ASSISTANT SECRETARY 04/06/2018

Electronic Signature of Signing Officer/Director Detail

Date