

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J06802

Entity Name: STI RISK MANAGEMENT CO.

Current Principal Place of Business:

4700 EXCHANGE COURT, SUITE 300
BOCA RATON, FL 33431

Current Mailing Address:

4700 EXCHANGE COURT, SUITE 300
BOCA RATON, FL 33431 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Officer/Director Detail :

Title PRESIDENT
Name ROCHE, ROBERT M.
Address 4700 EXCHANGE COURT, SUITE 300
City-State-Zip: BOCA RATON FL 33431

Title VP
Name TIMMERMAN, TIMOTHY
Address 4700 EXCHANGE COURT, SUITE 300
City-State-Zip: BOCA RATON FL 33431

Title SECRETARY, DIRECTOR
Name COEN, KEVIN J
Address 4700 EXCHANGE COURT, SUITE 300
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name HEWITT, WILLIAM S. JR.
Address 4700 EXCHANGE COURT, SUITE 300
City-State-Zip: BOCA RATON FL 33431

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: TIMOTHY TIMMERMAN

VICE PRESIDENT

04/14/2017

Electronic Signature of Signing Officer/Director Detail

Date