

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000059779

Entity Name: PROSPECTIVE RISK MANAGEMENT CORPORATION**Current Principal Place of Business:**4348 SOUTHPOINT BLVD.
SUITE 400
JACKSONVILLE, FL 32216**Current Mailing Address:**ATTN: MADELINE G. M. LOVEJOY
3210 EL CAMINO REAL STE 200
IRVINE, CA 92602 US**FEI Number: 20-4770398****Certificate of Status Desired:** No**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

Officer/Director Detail :

Title	PRESIDENT/DIRECTOR
Name	SNYDER, SCOTT C
Address	4348 SOUTHPOINT BLVD. SUITE 400
City-State-Zip:	JACKSONVILLE FL 32216

Title	CFO
Name	RISTAU, CHARLES M
Address	200 GALLERIA PKWY STE 1950
City-State-Zip:	ATLANTA GA 30339

Title	EVP
Name	PARK, ANTHONY J
Address	601 RIVERSIDE AVE
City-State-Zip:	JACKSONVILLE FL 32204

Title	AVP/ASST SEC
Name	LOVEJOY, MADELINE G. M.
Address	ATTN: MADELINE G. M. LOVEJOY 3210 EL CAMINO REAL STE 200
City-State-Zip:	IRVINE CA 92602

Title	CEO/DIRECTOR
Name	BRUCKMAN, ADAM
Address	200 GALLERIA PKWY STE 1950
City-State-Zip:	ATLANTA GA 30339

Title	EVP/GC/CORP SEC
Name	GRAVELLE, MICHAEL L
Address	601 RIVERSIDE AVE
City-State-Zip:	JACKSONVILLE FL 32204

Title	SVP/TREASURER
Name	MURPHY, DANIEL K
Address	601 RIVERSIDE AVE
City-State-Zip:	JACKSONVILLE FL 32204

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: MADELINE G. M. LOVEJOY**AVP/ASST SEC****02/18/2016**

Electronic Signature of Signing Officer/Director Detail

Date