2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2016
Secretary of State
CC7115753757

DOCUMENT# F08000003224

Entity Name: LANCET INDEMNITY RISK RETENTION GROUP, INC.

Current Principal Place of Business:

9550 S. EASTERN AVENUE, SUITE 253
LAS VEGAS, NV 89123

Current Mailing Address:

C/O RISK SERVICES
1605 MAIN STREET, SUITE 800
SARASOTA, FL 34236

FEI Number: 26-1479165

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROGERS, MICHAEL T
1605 MAIN STREET, SUITE 800
SARASOTA, FL 34236 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	DP
Name	IEZZI, ALAN J
Address	15511 N. FLORIDA AVENUE, SUITE D
City-State-Zip:	TAMPA FL 33613

Title	DC
Name	MANISCALCO, BENEDICT
Address	2727 W. MARTIN LUHTER KING BLVD, SUITE 800
City-State-Zip:	TAMPA FL 33607

Title	DT
Name	MANISCALCO, ANTHONY F
Address	2810 W. ST. ISABEL STREET, SUITE 201
City-State-Zip:	TAMPA FL 33607

Title	DV
Name	TISDEL, MARK A
Address	1520 SOUTH LAPEER ROAD, #120
City-State-Zip:	LAKE ORION MI 48360

Title	D
Name	ERIC, SPRINGALL K
Address	8360 W. SAHARA AVE., STE 110
City-State-Zip:	LAS VEGAS NV 89117

Title	S
Name	RODRIGUEZ, SALVATORE
Address	2810 W. ST. ISABEL STREET, #201B
City-State-Zip:	TAMPA FL 33607

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 MANISCALCO COO/DIRECTOR 04/14/2016

Electronic Signature of Signing Officer/Director Detail — Date