

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000004757

Entity Name: PARK WOOD RISK RETENTION GROUP, INC.**Current Principal Place of Business:**445 DEXTER AVENUE, STE. 9075
MONTGOMERY, AL 36104**Current Mailing Address:**445 DEXTER AVENUE, STE. 9075
MONTGOMERY, AL 36104 US**FEI Number:** 83-2796853**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLORIDA CHIEF FINANCIAL OFFICER
FLOIR, 200 EAST GAINES STREET
TALLAHASSEE, FL 32399 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	D/P
Name	SANDERS, CRAIG
Address	1064 GARDNER ROAD, SUITE 113
City-State-Zip:	CHARLESTON SC 29407

Title	T
Name	WINCH, TROY
Address	1605 MAIN STREET, STE. 800
City-State-Zip:	SARASOTA FL 34236

Title	D
Name	HUGHES, DOUGLAS B
Address	949 MOUNTAIN BRANCH DRIVE
City-State-Zip:	VESTAVIA AL 35226

Title	VP
Name	EBLEN, DAVID
Address	370 MOUNTAIN VIEW ROAD
City-State-Zip:	SPRINGVILLE AL 35146

Title	S
Name	MILLS, DAN
Address	2600 NORTH CENTRAL EXPRESSWAY, SUITE 600
City-State-Zip:	RICHARDSON TX 75080

Title	D
Name	CURTIN, PETER
Address	ONE METROPLEX DR., SUITE 400
City-State-Zip:	BIRMINGHAM AL 35209

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: TROY WINCH**TREASURER****04/11/2023**

Electronic Signature of Signing Officer/Director Detail

Date