FILED Aug 17, 2007 8:00 am Secretary of State

07-11-2007 90073 044 ***550.00

2007 FOR PROFIT CORPORATION ▽ANNUAL REPORT... . . . →

DOCUMENT # F05000004172

NOVUS INSURANCE COMPANY (RISK RETENTION GROUP)



7/:

Principal Place of Business

C/O HSBC/INSURANCE MGT (USA) 1180 SAM RITTENBERG BLVD. SUITE 235 CHARLESTON, SC 29407

Mailing Address

C/O HSBC/INSURANCE MGT (USA) 1180 SAM RITTENBERG BLVD. SUITE 235 CHARLESTON, SC 29407



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Applied For 4. FEI Number 56-2512233 Not Applicable

5. Certificate of Status Desired

07

07022007

\$8.75 Additional Fee Required

610-376-1750

CR2E034 (11/05)

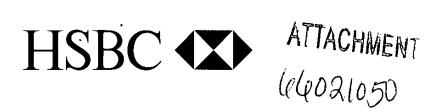
CHIEF FINANCIAL OFFICER P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

 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. I am familiar with, and accept the obligations of registered agent. 						
SIGNATURE Signature, typed or printed name of registered agent and tide it applicable (NOTE, Reputated Agent signature required when reinstating) DATE						
FILE NOWIII FEE IS \$550.00 Due by September 14, 2007 9. Election Campaign Finance Trust Fand Contribution			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS				<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SWEET, WILLIAM A M.D. 1730 READING BLVD. WYOMISSING, PA 19610					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BAKER, JOHN W M.D. 1 LILE COURT, SUITE 103 LITTLE ROCK, AR 72205					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BYRNE, T. KARL M.D. 96 JONATHAN LUCAS STREET CHARLESTON, SC 29425			DO NOT WRITE		
STREET ADDRESS	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	421	.D	IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pountain Valley, D HUTCHER, NEIL E M.D. CA, 92708 5855 BREMO ROAD, SUITE 506 RICHMOND, VA 23226					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, KENNETH B M.D. 1801 FAIRFIELD, SUITE 408 SHREVEPORT, LA 71101					
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an office 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						



- E. H-

August 13, 2007

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: F05000004172 – Novus Insurance Company (Risk Retention Group)

Annual Report/uniform business report (amended)

I am in receipt of your letter dated July 17, 2007 which I have enclosed a copy for your records.

Please see Attachment A to this letter. Please let me know if you need any further information.

Warmest Regards,

Theresa Eileen Higgins

Account Manager

Enclosure(s): 2

Officers & Directors for Novus Insurance Company (Risk Retention Group)

1. William A. Sweet, M.D. 1730 Reading Blvd. Wyomissing, PA 19610 Current Title(s): President & Director

2. John W. Baker, M.D. 1 Lile Court, Suite 103 Little Rock, AR 72205 Current Title(s): Secretary, Treasurer & Director

3. T. Karl Byrne, M.D. 96 Jonathan Lucas Street Charleston, SC 29425 Current Title: Resident Director

4. Peter C. Leport, M.D. 11160 Warner Avenue, Suite 421 Fountain Valley, CA 92708 Current Title: Director

5. Neil E. Hutcher, M.D. 5855 Bremo Road, Suite 506 Richmond, VA 23226 Current Title: Director

6. Kenneth B. Jones, M.D. 1801 Fairfield, Suite 408 Shreveport, LA 71101 Current Title: Director