Entity Name: APPLIED MEDICO-LEGAL SOLUTION RISK RETENTION
GROUP, INC.

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business: 2555 E CAMELBACK RD SUITE 700

PHOENIX, AZ 85016

DOCUMENT# F1600002821

Current Mailing Address:

2555 E CAMELBACK RD SUITE 700 PHOENIX, AZ 85016

FEI Number: 81-0603029

Name and Address of Current Registered Agent:

WILCOX, JANETTE 13901 SUTTON PARK DR S BLDG C SUITE 360 JACKSONVILLE, FL 32224 US FILED Mar 18, 2020 Secretary of State 2237364387CC

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	DP	Title	DIRECTOR, SECRETARY, VP	
Name	WELCH, RICHARD B	Name	SHAPIRO, STEVEN M	
Address	2555 E CAMELBACK RD SUITE 700	Address	2555 E CAMELBACK RD SUITE 700	
City-State-Zip:	PHOENIX AZ 85016	City-State-Zip:	PHOENIX AZ 85016	
Title		Title Name	D MCGOWAN, GREGORY E	
Name			2555 E CAMELBACK RD SUITE 700	
Address	2555 E CAMELBACK RD SUITE 700	Address		
City-State-Zip:	PHOENIX AZ 85016	City-State-Zip:	PHOENIX AZ 85016	
Title Name Address	DIRECT MILIZIA, LEE 2555 E CAMELBACK RD SUITE 700	Title Name Address	DIRECT MOON MD, HARRY 2555 E CAMELBACK RD SUITE 700	
Name Address	MILIZIA, LEE 2555 E CAMELBACK RD SUITE 700	Name Address	MOON MD, HARRY 2555 E CAMELBACK RD SUITE 700	
Name	MILIZIA, LEE	Name	MOON MD, HARRY	
Name Address	MILIZIA, LEE 2555 E CAMELBACK RD SUITE 700	Name Address	MOON MD, HARRY 2555 E CAMELBACK RD SUITE 700	
Name Address City-State-Zip:	MILIZIA, LEE 2555 E CAMELBACK RD SUITE 700 PHOENIX AZ 85016	Name Address City-State-Zip:	MOON MD, HARRY 2555 E CAMELBACK RD SUITE 700 PHOENIX AZ 85016	
Name Address City-State-Zip: Title	MILIZIA, LEE 2555 E CAMELBACK RD SUITE 700 PHOENIX AZ 85016 DIRECTOR	Name Address City-State-Zip: Title	MOON MD, HARRY 2555 E CAMELBACK RD SUITE 700 PHOENIX AZ 85016 ASSISTANT TREASURER	
Name Address City-State-Zip: Title Name Address	MILIZIA, LEE 2555 E CAMELBACK RD SUITE 700 PHOENIX AZ 85016 DIRECTOR KLEINMAN MD, JOSEPH H	Name Address City-State-Zip: Title Name	MOON MD, HARRY 2555 E CAMELBACK RD SUITE 700 PHOENIX AZ 85016 ASSISTANT TREASURER CHRISTIE, ANDREW	

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: LEE MILIZIA

DIRECTOR

03/18/2020

Date

Electronic Signature of Signing Officer/Director Detail

Date