

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222,3040

Form 630 Rev. 12/03

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - M (FORM MUST BE TYPED OR PRIM		Fee: \$50.00	TOR THE TEA	K		
1. Corporate ID No	portute ID No 2. Name of Corporation					
120591						
3. Street Address Principal Business of 5353 Mission 4 Business Phone No.	~		San Diego	State	2108	
<u>(800)</u> 422 -	7536	5. State of Incorporation OHIO			6. SIC Gode 5702	
	BROKERAGE SERVIC	ES/BENEFITS AND INSU				
8. NAMES AND ADDRESSES President Name	OF THE OFFICERS:	("X" BOX FOR ATTA	CHMENT) FILL IN S	PACES BEFORE USING	ATTACHMENTS	
Timothy Mon	yoihan	<u> </u>	Robert A. O	Byrne		
5353 Mission	<u>Center Rd.</u>	Ste. 310	Street Address 11440 Tombo	wk Creek Pky	ا	
San Diego	State CA	92108	Leawood	state KS	1210	
	eespen		Kelly J Kur			
	Blud S., Ste	.500	Sircei Addifest LOOSO OOK Tre	e Blvd.S. St	re. 500	
Cleveland	State	44131	Cleveland	State	21p 4413)	
Director Name	OF THE DIRECTOR:	S: ("X" BOX FOR ATT	ACHMENT) FILL IN	SPACES BEFORE USING	GATTACHMENTS	
Jerome Y. Giri	sko, Jr.					
	Blud S. S.	te.500	Street Address			
Cleveland	State H	44131	City	State	Zip	
Director Name	•		Director Name	•••••		
Street Address			Sirvet Address	<u> </u>		
Cup	State	Zip	City	State	Zψ	
10. SHARES AUTHORIZED (AUTHORIZED SHARES	("X" BOX FOR ATTA	CHMENT)	: 11. SHARES ISSUED (*) ISSUED SHARES	 X" BOX FOR ATTACHM	ENT)	
Number of Shares	ClassiScries	Par Value	Number of Shares	Class/Series	Par Value	
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riis report must be s	igned in ink by eithe	r the President, Vice Pri	esident, Secretary, Assistan	t Secretary, Treasurer, Re	eceiver or Trustee	
	120591°		including any accomp	anying schedules and statem	I have examined this report, nents, and that all statements	
File Date 7/25	105		confained herein are to	hellard	5/23/0K	
Check No. 2510541680			highature of Officer Date			
By:			Print or Type Name of Officer			
FOR SECRETARY OF STA	TE USE ONLY		Assistant	Secretary		

2005

CBIZ Special Risk Insurance Services, Inc. List of Officers and Directors

Jerome P. Grisko, Jr.
Director & Executive Vice-President
6050 Oak Tree Blvd. S.
Suite 500
Cleveland, OH 44131

Fimothy C. Moynihan
President
5353 Mission Center Road, Suite 310
San Diego, CA 92108

Robert A. O'Byrne Executive Vice-President 11440 Tomahawk Creek Parkway Leawood, KS 66211

Russell D. Compton Vice-President 6050 Oak Tree Blvd. S. Suite 500 Cleveland, OH 44131

Kelly J. Kuna Treasurer 6050 Oak Tree Blvd. S. Suite 500 Cleveland, OH 44131

Michael W. Gleespen Secretary 6050 Oak Tree Blvd. S. Suite 500 Cleveland, OH 44131

Nancy M. Mellard Assistant Secretary 11440 Tomahawk Creek Parkway Leawood, KS 66211



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

Matthew A. I	Brown, Secretary of S	tate		•	401.222.304	
PROFIT CORPOR	larch 1 • Filing	UAL REPORT Fee: \$50.00	FOR THE YEAR	2004		
1. Corporate ID No.	2. Name of Corporation			<u> </u>	<u></u>	
120591	CBIZ Special Risk	Insurance Services, In	C.			
3. Street Address Principal Business (City	State	Zip	
5353 Mission (<u>Center Dr., St.</u>	e. 310	San Diego	L CA	92108	
4. Business Phone No.		5. State of Incorporation	· ·		G. SIC Code	
<u>800) 422-7530</u>		OHIO			5702	
7. Brief Description of the Character CONSULTATION AND B	of Business Conducted in R ROKERAGE SERVICE:	hode Island SIBENEFITS AND INSUF	RANCE	_		
8. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC	CHMENT) FILL IN SPA	CES BEFORE USING AT	TACHMENTS	
President Name			Vice President Name	·		
Timothy C. Mo	yai han		Robert A. O'Byrne			
Street Address	1	7	Street Address	1	-	
5953 Mission Ce	nter Dr. 15te.	310	11440 Tomahau	K Creek PKW	, V	
City Change	State	<i>Σ</i> φ	City	State	Хip	
San Diego	CA	92108	Leawood	l KS	6621 <u>1</u>	
Secretary Name			: Treasurer Nume			
Michael W. Gile	espen	·	David S. Azzolina Street Address			
_						
10050 Oak Tree 1	Blvd., Ste. 500) 	6050 Oak Tree		ĭ	
	- 1	Zip	City	State	Zip	
Cleveland 9. NAMES AND ADDRESSES	OF THE DIRECTOR	44131 =	: Cleveland	OH	44131	
Director Name	OF THE DIRECTORS	S (A BOA FOR All.	ACHMENI) FILL IN SE Director Name	PACES BEFORE USING	ATTACHMENTS	
Jerome P. Grist	10 To		is team plane			
Street Address	·O) • · · · · · · · · · · · · · · · · · ·		: Street Address			
6050 Oak Tree 1	Blud Sto Fo	\sim	•			
City	State	Zip	City	State	Zip	
Cleveland	OH	44131				
Director Name	·#····₩·.i··i·······		Director Name		l	
Street Address			Street Address			
City	State	Zip	City	State	Zψ	
10. SHARES AUTHORIZED AUTHORIZED SHARES	 ("X" BOX FOR ATTA 	 CHMENT)	11. SHARES ISSUED ("X"	BOX FOR ATTACHME	 NT)	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
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This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	
File Date	2/23/04
Check No.	510450933
Ву:	Sc
FOR SECRE	TARY OF STATE USE ONLY

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Under penalty of perjury, I declare and affirm tha	t I have examined this report.
including any accompanying schedules and states	ments, and that all statements
contained herein are true and correct.	
Janey M. Wellans	2117/04
Significan of Officer	Date
Narry M. Mellard	
Print or Type Name of Officer	
Assistant Secreta	r'V
Title of Officer	
	* Form 630 Rev. 12/03

Common No Par



2. Name of Corporation

1. Corporate ID No.

120591

Edward S. Inman, III. Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

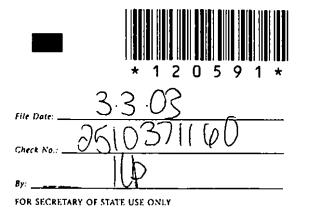
2003

CBIZ Special Risk Insurance Services, Inc.

PROFIL CORPORATION	ANNUAL KEPUKI	FUK INE	YEAR	2000
Filling Period: January 1-March 1 •	Filing Fee: \$50.00		•	
(FORM MUST BE TYPED OR PRINTED IN BLACK)				

3. Street Address Principul Busini	ess Office		City	State	Zip	
5353 Mission Ce	enter Drive, S	Suite 310	San Diego	CA	92108	
4. Business Phone No.		5. State of Incorporation	J		6. SIC Code	
(800) 422-7536		OHIO			5702	
7. Brief Description of the Charac						
Insurance and b	mefits consu	ultation and broke	erage services.			
8. NAMES AND ADDRI	ESSES OF THE OFF	FICERS ("X" BOX FOR ATTAC	HMENT) KILL IN SPACES E	EFORE USING ATTA	CHMENTS	_
President Name			Vice President Name			
Timothy C. Moyr	iihan		Robert A. O'By	rne		
Street Address			Street Address	1 6 1 600		
5353 Mission Ce	inter Road, Su	lite 310	2600 Grand Blv	d., Suite 600		
City	State	Zip	City	State	Zip	
San Diego	CA	92108	Kansas City	, MO	. 64108	
Secretary Name			Treasurer Name			
Michael W. Glee	spen		David S. Azzol	ina		
Street Address			Street Address			
6480 Rockside V	•	, Suite 330	6480 Rockside	Woods Blvd S.,	Suite 330	
City	State	Zip	City	State	Zip	
Cleveland	OH	44131	Cleveland	OH	44131	
	ESSES OF THE DIR	ECTORS ("X" BOX FOR ATT		S BEFORE USING ATT	ACHMENTS	
Director Name	-		; Director Name			
Jerome P. Grisk	o, Ir.					
Street Address	in all plants of		Street Address			
6480 Rockside V		•				
City	State	Zip	City	State	Zip	
Cleveland	OH	44131				
Director Name			Director Name			
Street Address			Street Address			
City	State	7:-	City	64.4.	***	
ony	21015	Zip	City	State	Zip	
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10. SHARES AUTHORIZ AUTHORIZED SHARES	ED IA BOAFOKAT	IACHMEN I)	11. SHARES ISSUED (*)	C BUX FUR ATTACHMEN	1)	
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850 COMM NO PAR VA	LUE		1	Common	no par valu	ıε
			•		-	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perfury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and Nancy M. Mellard

Print or Type Name of Officer

Assistant Secretary

Title of Officer ಷ್ ಮಾರ್

Farm 630 12/02

2003

Jerome P. Grisko, Jr.
Director & Executive Vice-President
6480 Rockside Woods Blvd. South, Suite 330
Cleveland, OH 44131

Timothy C. Moynihan President 5353 Mission Center Road, Suite 310 San Diego, CA 92108

Robert A. O'Byrne
Executive Vice-President
2600 Grand Blvd. Suite 600
Kansas City, MO 64108-4621

David S. Azzolina Treasurer 6480 Rockside Woods Blvd. South, Suite 330 Cleveland, OH 44131

Felicia P. Young Assistant Treasurer 6480 Rockside Woods Blvd. South, Suite 330 Cleveland, OH 44131

Michael W. Gleespen Secretary 6480 Rockside Woods Blvd. South, Suite 330 Cleveland, OH 44131

Nancy M. Mellard Assistant Secretary 2600 Grand Blvd. Suite 600 Kansas City, MO 64108-4621



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACE	k)				
1. Corporate ID No.	2. Name of Corporation		•		
120591	CBIZ Special Ris	sk Insurance Services,	Inc.		
3. Street Address Principal Business Of		·	City	State	Zip
5353 Mission Cente	r Road, Suite	310 5. State of Incorporation	San Diego	CA	92108 6. SIC Code
(800) 422–4271 7. Brief Description of the Character of		OHIO ode Island			5702
Insurance_&_Benef					
President Name		RS (*X* BOX FOR ATTACH	MENT) XX FILL IN SPACES BEF Vice President Name	ORE USING ATTACHMI	ents
Timothy C. Moyniha	n		Robert A. O'Byrne Street Address		
5353 Mission Cente	r Road, Suite	310 zip	2600 Grand Blvd.,	Suite 600	Zip
San Diego	CA	92108	Kansas City	MO .	64108-4621
Michael W. Gleespe	n		David S. Azzolina Street Address		
6480 Rockside Wood	s Blvd. South	, Suite 330	6480 Rockside Wood	lsEBlvd., South,	
Cleveland	OH	44131	Cleveland	OH	zir 44131
D. NAMES AND ADDRESSE Director Name				EFORE USING ATTACHM	
Jerome P. Grisko,	Jr.		Street Addiess		
6480 Rockside Wood	s Blvd. South,	, Suite 330	•		
Cleveland	State OH	Zip 44131	. City	State	Zip
irector Name	• ••	*14	Director Name	, .	
treet Address			Street Address		
lly	State	Zip	City	State	Zip
O. SHARES AUTHORIZED (UTHORIZED SHARES	"X" BOX FOR ATTACHM	. <u>.</u> .	11. SHARES ISSUED ("X" BO	OX FOR ATTACHMENT)	
winber of Shares 850 COMM NO PAR VALUE	Class/Series	Par Value	Number of Shares 1 COMM NO PAR VALU	Class/Series JE	Par Value
			:		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Doce:	-19.07	
	2510213438	
By:	Zu	
	ARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, Including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer Date

Nancy M. Mellard

Print or Type Name of Officer

Assistant Secretary:

Title of Officer

Rhode Island
Addendum to Profit Corporation Annual Report for the year 2002
Question #8:

Jerome P. Grisko, Jr. Director & Executive Vice-President 6480 Rockside Woods Blvd. South, Suite 330 Cleveland, OH 44131

Felicia P. Young
Assistant Treasurer
6480 Rockside Woods Blvd. South, Suite 330
Cleveland, OH 44131

Nancy M. Mellard Assistant Secretary 2600 Grand Blvd. Suite 600 Kansas City, MO 64108-4621