

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90044 016 ****50.00

DOCUMENT # M05000005757 1. Entity Name JBL&K RISK SERVICES, LLC					
Principal Place of Business 220 NW SECOND AVENUE, SUITE 800 PORTLAND, OR 97209			Mailing Address 220 NW SECOND AVENUE, SUITE 800 PORTLAND, OR 97209		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 81-0669367	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	P ☒ Delete		TITLE	Managing Member ☐ Change ☒ Addition	
NAME	ROMAIN, DAN		NAME	Beecher Carlson Holdings, Inc.	
STREET ADDRESS	3584 NW 123RD PLACE		STREET ADDRESS	2002 Summit Boulevard, Suite 925	
CITY-ST-ZIP	PORTLAND, OR 97229		CITY-ST-ZIP	Atlanta, GA 30319	
TITLE	P ☒ Delete		TITLE	☐ Change ☐ Addition	
NAME	FLOBERG, CHUCK		NAME		
STREET ADDRESS	339 NW 84TH PLACE		STREET ADDRESS		
CITY-ST-ZIP	PORTLAND, OR 97229		CITY-ST-ZIP		
TITLE	S ☒ Delete		TITLE	☐ Change ☐ Addition	
NAME	MEYEROWITZ, ADAM		NAME		
STREET ADDRESS	155 TROWBRIDGE ROAD		STREET ADDRESS		
CITY-ST-ZIP	ATLANTA, GA 30350		CITY-ST-ZIP		
TITLE	TAS ☒ Delete		TITLE	☐ Change ☐ Addition	
NAME	GAMSEY, DAVID		NAME		
STREET ADDRESS	115 MARCH GLEN POINT		STREET ADDRESS		
CITY-ST-ZIP	ATLANTA, GA 30328		CITY-ST-ZIP		
TITLE	TAS ☒ Delete		TITLE	☐ Change ☐ Addition	
NAME	SCHEINFELD, RYAN		NAME		
STREET ADDRESS	986 CUMBERLAND ROAD NE		STREET ADDRESS		
CITY-ST-ZIP	ATLANTA, GA 30306		CITY-ST-ZIP		
TITLE	AS ☒ Delete		TITLE	☐ Change ☐ Addition	
NAME	BUFFINGTON, MARA		NAME		
STREET ADDRESS	8010 MAGNOLIA WAY		STREET ADDRESS		
CITY-ST-ZIP	ROSWELL, GA 30075		CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
Beecher Carlson Holdings, Inc. <i>Christine C. Alligood</i> SIGNATURE: By: Christine C. Alligood, Assistant Secretary 4/7/2006 404-460-1410					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					

ATTACHMENT

20034756
#M050000057.57

BEECHER CARLSON

April 7, 2006

VIA FEDERAL EXPRESS

Florida Secretary of State
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, Florida 32301

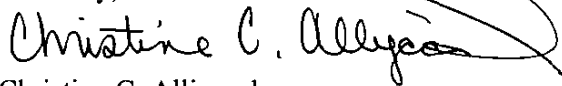
Re: JBL&K Risk Services, LLC

Dear Sir or Madam,

Enclosed, for filing, is the State of Florida, 2006 Annual Report for JBL&K Risk Services, LLC, along with our check in the amount of \$50.00 to cover the filing fee.

Please process this filing appropriately. If you have any questions, please contact me at 404-460-1410.

Sincerely,



Christine C. Alligood
Paralegal

Enclosures

ATTACHMENT

MA500005757 BEECHER CARLSON
20034756

April 7, 2006

VIA FEDERAL EXPRESS

Florida Secretary of State
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, Florida 32301

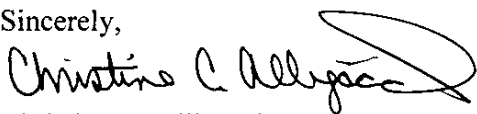
Re: Beecher Carlson Insurance Services, Inc.

Dear Sir or Madam,

Enclosed, for filing, is the State of Florida, 2006 Annual Report for Beecher Carlson Insurance Services, Inc., along with our check in the amount of \$150.00 to cover the filing fee.

Please process this filing appropriately. If you have any questions, please contact me at 404-460-1410.

Sincerely,



Christine C. Alligood
Paralegal

Enclosures