

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000004862

**Entity Name:** ARMOUR RISK MANAGEMENT INC.**Current Principal Place of Business:**1880 JFK BLVD SUITE 801  
PHILADELPHIA, PA 19103**Current Mailing Address:**1880 JFK BLVD SUITE 801  
PHILADELPHIA, PA 19103**FEI Number: 13-3028939****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	DIRECTOR
Name	HUNTINGTON, BRAD
Address	1880 JFK BLVD SUITE 801
City-State-Zip:	PHILADELPHIA PA 19103

Title	PRESIDENT
Name	DORAN, J MARCUS
Address	1880 JFK BLVD SUITE 801
City-State-Zip:	PHILADELPHIA PA 19103

Title	ASSISTANT SECRETARY
Name	WEAVER, TERRI R
Address	1880 JFK BLVD SUITE 801
City-State-Zip:	PHILADELPHIA PA 19103

Title	TREASURER
Name	SCHLEIDER, BRIAN
Address	1880 JFK BLVD SUITE 801
City-State-Zip:	PHILADELPHIA PA 19103

*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: TERRI R. WEAVER****ASSISTANT SECRETARY 03/05/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date