

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 236543

FILED
Mar 16, 2011
Secretary of State

Entity Name: ALL RISK MANAGEMENT INSURANCE SERVICES, INC.

Current Principal Place of Business:

2426 E ROBINSON ST
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 531064
ORLANDO, FL 328531064 US

New Mailing Address:

FEI Number: 59-0901351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAHL, JEFFREY G PRES
2426 E ROBINSON ST
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: STAHL, JEFFERY G
Address: 2503 DRIFTWOOD DRIVE
City-St-Zip: FERN PARK, FL 32730 US

Title: CEO
Name: STAHL, LOWELL J
Address: 1135 LAMAR AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: T
Name: STAHL, DENISE C
Address: 1135 LAMAR AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: S
Name: STAHL, SHEILA C
Address: 2503 DRIFTWOOD DR
City-St-Zip: FERN PARK, FL 32730 US

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: JEFFREY G STAHL

PRES

03/16/2011

Electronic Signature of Signing Officer or Director

Date