## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000004840

Entity Name: I.S.R. MARINE INSURANCE, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
50 SALEM BLD. B LYNNFIELI	STREET D, MA 01940				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	D, MA 01940				
FEI Number:	02-0431755	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
COOPER, 5821 DOR' TAMPA, FL	Y WAY	3			
The above in the State		submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Age	ent	Date	
Election Can	npaign Financin	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) SARGENT, DAN 50 SALEM STR LYNNFIELD, M	EET	Title: ( Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID SARGENT P 01/20/2009