

2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 27, 2008
Secretary of State**

DOCUMENT# F05000003868

Entity Name: FRISCO RISK PARTNERS, INC.

Current Principal Place of Business:

2005 PAN AM CIRCLE, SUITE 300
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 908
MEDFORD, NJ 08055

New Mailing Address:

FEI Number: 20-3033395 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTHOLOMEW, ROBERT W
2005 PAN AM CIRCLE, SUITE 300
TAMPA, FL 33607 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: RONALD HODGE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: BARTHOLOMEW, ROBERT
Address: 709 STOKES RD.
City-St-Zip: MEDFORD, NJ 08055

Title: VCV () Delete
Name: HODGE, RONALD L
Address: 709 STOKES RD.
City-St-Zip: MEDFORD, NJ 08055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT BARTHOLOMEW

PRES

10/27/2008

Electronic Signature of Signing Officer or Director

Date