

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001978

FILED
Jun 24, 2009
Secretary of State

Entity Name: BROWN AND RIDING INSURANCE SERVICES, INC.

Current Principal Place of Business:

777 S FIGUEROA ST
STE 2550
LOS ANGELES, CA 90017

New Principal Place of Business:

Current Mailing Address:

777 S FIGUEROA ST
STE 2550
LOS ANGELES, CA 90017

New Mailing Address:

FEI Number: 94-2679254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 E 6TH AVE
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: BROWN, CHRISTOPHER A
Address: 777 S FIGUEROA ST - STE 2550
City-St-Zip: LOS ANGELES, CA 90017

Title: VPD () Delete
Name: MONSHI, SHAIDA T
Address: 777 S FIGUEROA ST - STE 2550
City-St-Zip: LOS ANGELES, CA 90017

Title: SDD () Delete
Name: HOWING, RAMON C
Address: 777 S FIGUEROA ST - STE 2550
City-St-Zip: LOS ANGELES, CA 90017

Title: SRVP () Delete
Name: PERUZZI, ANDREW
Address: 777 S FIGUEROA ST - STE 2550
City-St-Zip: LOS ANGELES, CA 90017

Title: SRVP () Delete
Name: GORIN, PETER W
Address: 777 S FIGUEROA ST
City-St-Zip: LOS ANGELES, CA 90017

Title: SRVP () Delete
Name: HORTON, H. TODD
Address: 777 S FIGUEROA ST
City-St-Zip: LOS ANGELES, CA 90017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BROWN, CHRISTOPHER A
Address: 777 S FIGUEROA ST - STE 2550
City-St-Zip: LOS ANGELES, CA 90017

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

Title: () Change () Addition
Name:
Address:
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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: JEFF KEUL

VP

06/24/2009

Electronic Signature of Signing Officer or Director

_____ Date