

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002888

FILED
Apr 29, 2011
Secretary of State

Entity Name: MACDONNELL SECURITY RISK MANAGEMENT LIMITED, INCORPORATED

Current Principal Place of Business:

1505 BARRINGTON STREET
HALIFAX,
NOVA SCOTIA CANADA 83J 3K5, XX

New Principal Place of Business:

1505 BARRINGTON STREET, SUITE 1100
SUITE 1100
HALIFAX,, NS B3J 3K5 CA

Current Mailing Address:

1505 BARRINGTON STREET
HALIFAX,
NOVA SCOTIA CANADA 83J 3K5, XX

New Mailing Address:

1505 BARRINGTON STREET, SUITE 1100
SUITE 1100
HALIFAX,, NS B3J 3K5 CA

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CAPITAL CONNECTION, INC.
417 E VIRGINIA ST
SUITE 1
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CAPITAL CONNECTION INC.
417 E VIRGINIA ST
SUITE 1
TALLAHASSEE, FL 32301 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: CAPITAL CONNECTION INC.

04/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: MACDONNELL, RALSTON
Address: 1505 BARRINGTON ST, SUITE 1100
City-St-Zip: HALIFAX, NOVA SCOTIA, CA B3J 3K5

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: RALSTON MACDONNELL

PRES

04/29/2011

Electronic Signature of Signing Officer or Director

Date