2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001216

Entity Name: RISK SERVICES - SOUTH, INC.

FILED Mar 18, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
1800 SECOND STREET, SUITE 909 SARASOTA, FL 34236						
Current Mailing Address:				New Mailing Address:		
P BOX 2139 SARASOTA, FL 34230			PO BOX 2139 SARASOTA, FL 34230			
FEI Number: 03-0355367 FEI Number Applied For () FEI Numb				nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
WOLFE, RANDOLPH J ESQ. FOLEY & LARDNER 100 N. TAMPA STREET, SUITE 2700 TAMPA, FL 33602 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:						
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () I HARKAVY, JON 8100 HAMILTON BETHESDA, MD			Title: Name: Address: City-St-Zip:	PGC (X) Change () Addition HARKAVY, JON 10208 LLOYD RD. POTOMAC, MD 20854	
Title: Name: Address: City-St-Zip:	VTD () I ROGERS, MICH 7323 PINENEED SARASOTA, FL	LE RD		Title: Name: Address: City-St-Zip:	VPTD (X) Change () Addition ROGERS, MICHAEL T 165 BRYANT DRIVE SARASOTA, FL 34236	
Title: Name: Address: City-St-Zip:	S () I ROY, PAMELA 5 POINT RIDGE BARRE, VT 056			Title: Name: Address: City-St-Zip:	S (X) Change () Addition ROY, PAMELA 114 POINT RIDGE ROAD BARRE, VT 05641	
Title: Name: Address: City-St-Zip:	AS () I ROSS, HEATHER 4910 WESTWAY BETHESDA, MD	R ORIVE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () I HARRIS, G. W 7251 PLOVER'S SARASOTA, FL			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I DIAL, C. FERRE 1800 SECOND S SARASOTA, FL	ST STE 909		Title: Name: Address: City-St-Zip:	D (X) Change () Addition LAITALA, CHRISTOPHER GPP, 165 MASON ST., 3RD FLOOR GREENWICH, CT 06830	

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: HEATHER ROSS AS 03/18/2008