## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000001216

Entity Name: RISK SERVICES - SOUTH, INC.

FILED Jan 15, 2009 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:** PO BOX 2139 SARASOTA, FL 34230 FEI Number: 03-0355367 FEI Number Applied For ( ) FEI Number 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: PGC ( ) Delete Title: (X) Change ( ) Addition HARKAVY, JON HARKAVY, JON Name: Name: 10208 LLOYD RD. 10208 LLOYD RD. Address: Address: City-St-Zip: POTOMAC, MD 20854 City-St-Zip: POTOMAC, MD 20854 **VPTD** Title: Title: () Delete (X) Change ( ) Addition Name: ROGERS, MICHAEL T Name: ROGERS, MICHAEL T 165 BRYANT DRIVE 165 BRYANT DRIVE Address: Address: SARASOTA, FL 34236 SARASOTA, FL 34236 City-St-Zip: City-St-Zip: Title: ( ) Delete Title: AS (X) Change ( ) Addition ROY, PAMELA ROY, PAMELA Name: Name: 114 POINT RIDGE ROAD 114 POINT RIDGE ROAD Address: Address: City-St-Zip: BARRE, VT 05641 City-St-Zip: BARRE, VT 05641 Title: ( ) Delete Title: () Change () Addition ROSS, HEATHER Name: Name: Address: 4910 WESTWAY DRIVE Address: City-St-Zip: BETHESDA, MD 20816 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete HARRIS, G. W Name: LAITALA, CHRISTOPHER Name: 7251 PLOVER'S WAY Address: GPP. 165 MASON ST., 3RD FLOOR Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip: GREENWICH, CT 06830 Title: (X) Delete Title: () Change () Addition LAITALA, CHRISTOPHER Name: Name: GPP, 165 MASON ST., 3RD FLOOR Address: Address: City-St-Zip: City-St-Zip: 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 01/15/2009