2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002887

Entity Name: AMERISAFE RISK SERVICES, INC.

FILED Mar 15, 2010 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

2301 HWY. 190 WEST DERIDDER, LA 70634

Current Mailing Address: New Mailing Address:

2301 HWY. 190 WEST DERIDDER, LA 70634

FEI Number: 72-1274075 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:

DUFFY, BRIAN S 1709 HERMITAGE BLVD SUITE 200 TALLAHASSEE, FL 32308 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:

Title: COO

Name: BANTA, GEOFFREY R Address: 2301 HWY 190 W City-St-Zip: DERIDDER, LA 70634

Title: CFO

Name: FROST, G. JANELLE
Address: 2301 HWY. 190 WEST
City-St-Zip: DERIDDER, LA 70634

Title: EVPS

Name: WALKER, TODD R Address: 2301 HWY. 190 WEST City-St-Zip: DERIDDER, LA 70634

Title: PCEO

Name: BRADLEY, C. ALLEN JR. Address: 2301 HWY. 190 WEST City-St-Zip: DERIDDER, LA 70634

Title: CONT

Name: GRANGER, PAULA
Address: 2301 HWY. 190 WEST
City-St-Zip: DERIDDER, LA 70634

Title: SRVP

 Name:
 LESTAGE, CHRIS

 Address:
 2301 HIGHWAY 190 WEST

 City-St-Zip:
 DERIDDER, LA 70634

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: PAULA GRANGER CONT 03/15/2010