

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J64297

FILED
Apr 26, 2010
Secretary of State

Entity Name: INSURANCE RISK SERVICES, INC.

Current Principal Place of Business:

% SHAWN R. RADER
215 N. EOLA DR.
ORLANDO, FL 32801

New Principal Place of Business:

116 S. PARK AVE
SANFORD, FL 32771

Current Mailing Address:

% SHAWN R. RADER
215 N. EOLA DR.
ORLANDO, FL 32801

New Mailing Address:

116 S. PARK AVE
SANFORD, FL 32771

FEI Number: 59-2793347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RADER, SHAWN R.
215 N. EOLA DR.
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

JAMES ROBERT HAWKINS, JR
116 S PARK AVE
SANFORD, FL 32771 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: JAMES ROBERT HAWKINS, JR

04/26/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD
Name: HAWKINS, JAMES ROBERT JR
Address: 856 SILVERWOOD DR
City-St-Zip: LAKE MARY, FL 32746

Title: S
Name: HAWKINS, JAMES R JR
Address: 856 SILVERWOOD DR
City-St-Zip: LAKE MARY, FL 32746

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: JAMES ROBERT HAWKINS, JR

PRES

04/26/2010

Electronic Signature of Signing Officer or Director

Date