## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000032369

Entity Name: INFORMATION RISK GROUP, LLC

FILED Mar 31, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
3220 HENDERSON BLV TAMPA, FL 33609	/D		
Current Mailing Address:		New Mailing Address:	
3220 HENDERSON BLV TAMPA, FL 33609	/D		
FEI Number:	FEI Number Applied For ( )	FEI Number Not Applicable (X)	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
ACKER, SHAWN T 4641 HIDDEN SHADOW TAMPA, FL 33614 U	_		
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	l office or registered agent, or both
SIGNATURE:			
Electro	nic Signature of Registered Age	ent	Date

ADDITIONS/CHANGES:

() Change () Addition

MANAGING MEMBERS/MANAGERS:

MGR () Delete Title:

 Name:
 ACKER, SHAWN T
 Name:

 Address:
 4641 HIDDEN SHADOW DRIVE
 Address:

 City-St-Zip:
 TAMPA, FL 33614
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHAWN T. ACKER MGR 03/31/2006