

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079197

Entity Name: HARBOUR RISK MANAGEMENT, LLC

FILED
Feb 05, 2007
Secretary of State

Current Principal Place of Business:

801 ANCHOR RODE DRIVE
103
NAPLES, FL 34103 US

Current Mailing Address:

801 ANCHOR RODE
NAPLES, FL 34103 US

New Principal Place of Business:

801 ANCHOR RODE DRIVE
SUITE 103
NAPLES, FL 34103 US

New Mailing Address:

801 ANCHOR RODE DRIVE
SUITE 103
NAPLES, FL 34103 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, KEVIN G ESQ
4001 TAMIAMI TRAIL N.
SUITE 300
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

NOVATT, JEFF M ESQ.
821 FIFTH AVENUE SOUTH
SUITE 201
NAPLES, FL 34102 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: JEFF M. NOVATT, ESQ.

02/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KASTROL, WILLIAM H
Address: 801 ANCHOR RODE DRIVE
City-St-Zip: NAPLES, FL 34103 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KASTROL, WILLIAM H
Address: 801 ANCHOR RODE DRIVE, SUITE 103
City-St-Zip: NAPLES, FL 34103 US

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: WILLIAM H. KASTROLL

MGR

02/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date