

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079860

Entity Name: RISC SERV LLC

FILED  
Apr 29, 2007  
Secretary of State

**Current Principal Place of Business:**

8450 TALLAHASSEE DR NE  
ST. PETERSBURG, FL 33702 US

**New Principal Place of Business:**

**Current Mailing Address:**

8450 TALLAHASSEE DR NE  
ST. PETERSBURG, FL 33702 US

**New Mailing Address:**

FEI Number: 20-2000248

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MENKE, ROBERT G  
8450 TALLAHASSEE DR NE  
ST. PETERSBURG, FL 33702 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MENKE, ROBERT G  
Address: 8450 TALLAHASSEE DR NE  
City-St-Zip: FL, FL 33702

Title: MGRM ( ) Delete  
Name: O'KEEFFE, JOSEPH G  
Address: 3324 SAN MIGUEL ST.  
City-St-Zip: TAMPA, FL 33629 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: ROBERT G. MENKE

MGRM

04/29/2007

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