2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116007

Title:

Name:

Address:

City-St-Zip:

Entity Name: WORLD RISK MANAGEMENT, LLC

() Delete

FILED Feb 06, 2007 Secretary of State

() Change (X) Addition

MILHAUSEN, DAVID J

ORLANDO, FL 32819

8971 CHARLESTON PARK

Current Principal Place of Business:				New Principal Place of Business:		
8767 THE ESPLANADE BLVD., #33 ORLANDO, FL 32836				141 TERRA MANGO LOOP		
				A ORLANDO, FL 32835		
Current Mailing Address:				New Mailing Address:		
8767 THE ESPLANADE BLVD., #33 ORLANDO, FL 32836				141 TERRA MANGO LOOP A		
ORLANDO	,1 E 32000			ORLANDO, FL 32835		
FEI Number:	20-8039920	FEI Number Applied For ()	FEI Nur	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
MILLER, SOUTH & MILHAUSEN, P.A. C/O RICHARD D. BAXTER, ESQ. 1000 LEGION PLACE, SUITE 1200 ORLANDO, FL 32801 US						
The above in the State		ubmits this statement for the p	purpose o	f changing its registere	ed office or registered agent, or both,	
SIGNATUR	:E:					
	Electroni	c Signature of Registered Age	ent		Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	SCHAARE, MICH	ANADE BLVD., #33		Title: Name: Address: City-St-Zip:	() Change () Addition	

Title:

Name:

Address: 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: DAVID MILHAUSEN CFO 02/06/2007