2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 03, 2012
Secretary of State

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Entity Name: RISK TRANSFER PROGRAMS, LLC

Current Principal Place of Business:

219 E. LIVINGSTON ST
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

219 E. LIVINGSTON ST
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 26-4106325 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOWMAN, WILLIAM R JR ESQ
1000 LEGION PLACE STE 1700
ORLANDO, FL 32801 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: MGR
Name: HUGHES, PAUL R
Address: 219 E. LIVINGSTON ST
City-St-Zip: ORLANDO, FL 32801

Title: P
Name: FABRIZIO, DINO A
Address: 219 E LIVINGSTON STREET
City-St-Zip: ORLANDO, FL 32801

I hereby 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 Statues.

SIGNATURE: PAUL R. HUGHES MGR 02/03/2012

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