2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000778

Entity Name: SAF*RISK L.C.

City-St-Zip:

ST. PETERSBURG, FL 33785

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 19610 GULF BOULEVARD SUITE 416 ST. PETERSBURG, FL 33785 **New Mailing Address: Current Mailing Address:** 19610 GULF BOULEVARD SUITE 416 ST. PETERSBURG, FL 33785 FEI Number: 59-3344580 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BELL, JOHN U SUITE 416, 19610 GULF BOULEVARD ST. PETERSBURG, FL 33785 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete BELL, JOHN U Name: Name: Address: SUITE 416, 19610 GULF BOULEVARD Address: City-St-Zip: ST. PETERSBURG, FL 33785 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: FERENC, SUSAN A Name: Address: SUITE 416, 19610 GULF BOULEVARD 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: JOHN U. BELL MGRM 03/10/2009