

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001145

FILED
Mar 19, 2008
Secretary of State

Entity Name: SPECIALTY RISK SERVICES, LLC

Current Principal Place of Business:

GOODWIN SQUARE
225 ASYLUM STREET, 16TH FLOOR
HARTFORD, CT 06103

New Principal Place of Business:

Current Mailing Address:

GOODWIN SQUARE
225 ASYLUM STREET, 16TH FLOOR
HARTFORD, CT 06103

New Mailing Address:

FEI Number: 20-0730592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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 () Delete
Name: BOURES, ANTHONY J
Address: HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06115

Title: MGR () Delete
Name: BENNETT, JOHNATHAN
Address: 200 EXECUTIVE BLVD. WEST STREET, 200/4
City-St-Zip: SOUTHERN, CT 06489

Title: MGR () Delete
Name: BERG, GREGORY H
Address: HARTFORD PLAZA,
City-St-Zip: HARTFORD, CT 06115

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BOURES, ANTHONY J
Address: ONE HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06155

Title: MGR (X) Change () Addition
Name: BENNETT, JOHNATHAN
Address: ONE HARTFORD PLAZA
City-St-Zip: HARTFORD, CT 06155

Title: MGR (X) Change () Addition
Name: BERG, GREGORY H
Address: ONE HARTFORD PLAZA,
City-St-Zip: HARTFORD, CT 06155

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: ANTHONY J. BOURES

MGR

03/19/2008

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