

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000348

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Entity Name:** RISK & INSURANCE CONSULTING SERVICES, LLC

**Current Principal Place of Business:**

120 CROWN OAK CENTRE DRIVE  
LONGWOOD, FL 32750

**New Principal Place of Business:**

5500 LILBURN STONE MOUNTAIN RD  
SUITE B  
STONE MOUNTAIN, GA 30087

**Current Mailing Address:**

120 CROWN OAK CENTRE DRIVE  
LONGWOOD, FL 32750

**New Mailing Address:**

5500 LILBURN STONE MOUNTAIN RD  
SUITE B  
STONE MOUNTAIN, GA 30087

FEI Number: 91-1878031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JENNINGS, LYNN  
120 CROWN OAK CENTRE DRIVE  
LONGWOOD, FL 32750 US

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

RITCHIE, RICHARD  
411 WALNUT STREET # 4235  
GREEN COVE SPRINGS, FL 32043 US

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: RICHARD RITCHIE

03/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: RITCHIE, RICHARD  
Address: 411 WALNUT STREET # 4235  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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 Statutes.

SIGNATURE: RICHARD RITCHIE

MGR

03/05/2012

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