

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000049051

FILED
Jun 30, 2006
Secretary of State

Entity Name: P.E.O. RISK MANAGEMENT, INC.

Current Principal Place of Business:

25 SECOND STREET NORTH #200
ST. PETERSBURG, FL 33701

New Principal Place of Business:

ONE PROGRESS PLAZA
500
ST. PETERSBURG, FL 33701 US

Current Mailing Address:

25 SECOND STREET NORTH #200
ST. PETERSBURG, FL 33701

New Mailing Address:

ONE PROGRESS PLAZA
500
ST. PETERSBURG, FL 33701 US

FEI Number: 59-3646000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, WILLIAM H III
25 2ND STREET N
STE 200
SAINT PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

MILLS, WILLIAM H III
ONE PROGRESS PLAZA
500
SAINT PETERSBURG, FL 33701 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: WILLIAM H. MILLS, III

06/30/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCP () Delete
Name: MILLS, WILLIAM H III
Address: 886 RAFAEL BOULEVARD NORTHEAST
City-St-Zip: ST. PETERSBURG, FL 33704

Title: DVP () Delete
Name: CAMPBELL, HARRY
Address: 102 WESTBROOK COURT
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM H. MILLS, III

DCP

06/30/2006

Electronic Signature of Signing Officer or Director

Date