

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000123198

FILED
Apr 29, 2005
Secretary of State

Entity Name: ADVANCED RISK MANAGEMENT, INC.

Current Principal Place of Business:

17606 KAMBRIDGE POINT DRIVE
LUTZ, FL 33548

New Principal Place of Business:

Current Mailing Address:

17606 KAMBRIDGE POINT DRIVE
LUTZ, FL 33548

New Mailing Address:

FEI Number: 11-3665567

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGGETT, DONALD
17606 KAMBRIDGE PT DR
LUTZ, FL 33548 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEGGETT, DONALD JR.
Address: 17606 KAMBRIDGE POINT DRIVE
City-St-Zip: LUTZ, FL 33548

Title: T () Delete
Name: LEGGETT, KARLA
Address: 17606 KAMBRIDGE POINT DRIVE
City-St-Zip: LUTZ, FL 33548

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 Section 119.07(3)(i), 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: DONALD LEGGETT JR

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date