2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051862

TAMPA, FL 33607

Entity Name: EXCESS RISK SOLUTIONS, INC.

FILED Apr 23, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

3507 E FRONTAGE ROAD 19122 CHEMILLE DRIVE SUITE 190 LUTZ, FL 33558 US

Current Mailing Address: New Mailing Address:

3507 E FRONTAGE ROAD 19122 CHEMILLE DRIVE SUITE 190 LUTZ, FL 33558 US TAMPA, FL 33607 US

FEI Number: 32-0112975 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:

OSBORNE, CHARLES C OSBORNE, CHARLES C DIR 3507 E FRONTAGE ROAD 19122 CHEMILLE DRIVE SUITE 190 LUTZ, FL 33558 US TAMPA, FL 33607 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: CHARLES C OSBORNE 04/23/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete Title: DIR (X) Change () Addition Name: OSBORNE, CHARLES C Name: OSBORNE, CHARLES C DIR Address: 3507 E FRONTAGE ROAD STE 190 Address: 19122 CHEMILLE DRIVE

City-St-Zip: TAMPA, FL 33607 US City-St-Zip: LUTZ, FL 33558 US

Title: Title: (X) Change () Addition () Delete Name: OSBORNE, AMY D Name: OSBORNE, AMY D DIR 19122 CHEMILLE DRIVE Address: 19122 CHEMILLE DRIVE Address: LUTZ, FL 33558 US City-St-Zip: LUTZ, FL 33558 US 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 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: CHARLES C OSBORNE DIR 04/23/2008