2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2008
Secretary of State

DOCUMENT# P07000115107

Entity Name: COMMUNITY RISK & INSURANCE SOLUTIONS, INC.

Current Principal Place of Business:

10014 GROVE DRIVE
SUITE A
PORT RICHEY, FL 34668

New Principal Place of Business:

10014 GROVE DRIVE
SUITE A
PORT RICHEY, FL 34668 US

Current Mailing Address:

10014 GROVE DRIVE
SUITE A
PORT RICHEY, FL 34668

New Mailing Address:

12605 CLOCK TOWER PARKWAY
BAYONET POINT, FL 34667 US

FEI Number: 26-1263717 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARRETT, SUSAN
12605 CLOCK TOWER PARKWAY
SUITE A
PORT RICHEY, FL 34667 US

Name and Address of New Registered Agent:

BARRETT, SUSAN H
12605 CLOCK TOWER PARKWAY
BAYONET POINT, FL 34667 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: SUSAN H. BARRETT 07/08/2008
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 (X).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BARRETT, SUSAN
Address: 12605 CLOCK TOWER PARKWAY
City-St-Zip: PORT RICHEY, FL 34667

Title: SECY ( ) Delete
Name: STALEY, MELVIN R
Address: 12605 CLOCK TOWER PARKWAY
City-St-Zip: BAYONET POINT, FL 34667 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: BARRETT, SUSAN
Address: 12605 CLOCK TOWER PARKWAY
City-St-Zip: PORT RICHEY, FL 34667

Title: ( ) Change ( ) Addition
Name:
Address:
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: SUSAN H. BARRETT PS 07/08/2008
Electronic Signature of Signing Officer or Director Date