

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18235

FILED
Aug 10, 2004
Secretary of State

Entity Name: ALL RISK ADMINISTRATORS, INC.

Current Principal Place of Business:

8010 BLIND PASS ROAD
ST. PETE BEACH, FL 33706

New Principal Place of Business:

5901 SUN BLVD
ST PETERSBURG, FL 33715

Current Mailing Address:

POST OFFICE BOX 66237
ST. PETE BEACH, FL 337366237

New Mailing Address:

FEI Number: 59-2868689 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DENNIS HERNANDEZ & ASSOCIATES, L.L.C.
410 SOUTH CEDAR AVENUE
TAMPA, FL 33606 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: PTD () Delete
Name: MARCOTTE, KAREN
Address: 8010 BLIND PASS ROAD
City-St-Zip: ST. PETE BEACH, FL 33706

Title: VDS () Delete
Name: MARCOTTE, FRANCIS J
Address: 8010 BLIND PASS ROAD
City-St-Zip: ST. PETE BEACH, FL 33706

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: JACK MARCOTTE

VP

08/10/2004

Electronic Signature of Signing Officer or Director

Date