

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000075881

FILED
May 01, 2007
Secretary of State

Entity Name: PREMIERE RISK MANAGEMENT OF FLORIDA, INC.

Current Principal Place of Business:

3732 RIVEREDGE DR.
JACKSONVILLE, FL 32277 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 350448
JACKSONVILLE, FL 32225 US

New Mailing Address:

PO BOX 350448
JACKSONVILLE, FL 32235 US

FEI Number: 59-3402848

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, JAMES V
217 PONTE VEDRA PARK DRIVE
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

SHANNON, DENNIS L
3732 RIVEREDGE DRIVE
JACKSONVILLE, FL 32277 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: DENNIS L. SHANNON

05/01/2007

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: PSTD () Delete
Name: SHANNON, DENNIS
Address: 3732 RIVEREDGE DRIVE
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DENNIS L. SHANNON

PSTD

05/01/2007

Electronic Signature of Signing Officer or Director

Date