2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007
Secretary of State

DOCUMENT# P96000097879

Entity Name: CONSULTANTS IN RISK MANAGEMENT AND INSURANCE, INC.

Current Principal Place of Business:

3660 CENTRAL AVE
SUITE F
FORT MYERS, FL 33901

New Principal Place of Business:

3660 CENTRAL AVE
SUITE 7
FORT MYERS, FL 33901

Current Mailing Address:

P.O. BOX 2030
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 65-0724185 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUKE, M. THOMAS JR
3660 CENTRAL AVE
SUITE 7
FORT MYERS, FL 33901 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: D ( ) Delete
Name: RUKE, M. THOMAS JR
Address: 3660 CENTRAL AVE., SUITE 7
City-St-Zip: FORT MYERS, FL 33901

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 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: M. THOMAS RUKE, JR. D 01/17/2007

Electronic Signature of Signing Officer or Director — Date