2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S22130

Current Principal Place of Business:

FILED Jan 13, 2005 Secretary of State

Entity Name: ALLIANCE MARINE RISK MANAGERS OF FLORIDA, INC.

901 SE 17TH ST STE. 209 FT LAUDERDALE, FL 33316 US **New Mailing Address: Current Mailing Address:** 901 SE 17TH ST STE 209 FT LAUDERDALE, FL 33316 US FEI Number: 65-0245805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

New Principal Place of Business:

ALLEN, DAVID F 901 SE 17TH ST STE 209

FT LAUDERDALE, FL 33316 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ALLEN, DAVID F., Name: Name: ALLEN, DAVID F 901 SE 17TH ST., STE 209 901 SE 17TH ST., STE 209 Address: Address: City-St-Zip: FT LAUDERDALE, FL City-St-Zip:

FT LAUDERDALE, FL 33316 US Title: PD Title: PD (X) Change () Addition () Delete

Name: SILBERMAN, FREDRICA. Name: SILBERMAN, FREDRIC A 1400 OLD COUNTRY RD STE 307 1400 OLD COUNTRY RD STE 307 Address: Address: WESTBURY, NY 11590 US WESTBURY, NY

City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: VD

DEPAOLA, VINCENT F. DEPAOLA, VINCENT F Name: Name: Address:

1400 OLD COUNTRY RD STE 307 1400 OLD COUNTRY RD STE 307 Address: City-St-Zip: WESTBURY, NY City-St-Zip: WESTBURY, NY 11590 US

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: VINCENT F. DEPAOLA VD 01/13/2005