

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000003080

Entity Name: INSURANCE RISK ASSESSMENT ANALYSTS, INC.

Current Principal Place of Business:

541 SOUTH ORLANDO AVENUE
SUITE 209
MAITLAND, FL 32751

Current Mailing Address:

541 SOUTH ORLANDO AVENUE
SUITE 209
MAITLAND, FL 32751

FEI Number: 59-3419289

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIVINGSTONE, RON
541 SOUTH ORLANDO AVENUE
SUITE 209
MAITLAND, FL 32751 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

Officer/Director Detail :

Title D
Name LIVINGSTONE, RON
Address 541 SOUTH ORLANDO AVENUE,
 SUITE 209
City-State-Zip: MAITLAND FL 32751

I hereby 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 all other like empowered.

SIGNATURE: RON LIVINGSTONE

DIRECTOR

04/23/2014

Electronic Signature of Signing Officer/Director Detail

Date