

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000000362

Entity Name: RPX RISK RETENTION GROUP, INC.**Current Principal Place of Business:**201 MERCHANT STREET, SUITE 2400
HONOLULU, HI 96813**Current Mailing Address:**201 MERCHANT STREET, SUITE 2400
HONOLULU, HI 96813 US**FEI Number:** 45-3503201**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAYNES, WILLIAM A
13901 SUTTON PARK DRIVE SOUTH
BUILDING C, SUITE 360
JACKSONVILLE, FL 32224 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 PRESIDENT
Name KINGSLEY, ROBERT
Address ONE MARKET PLAZA, STEUART
 TOWER, SUITE 700
City-State-Zip: SAN FRANCISCO CA 94105

Title TREASURER
Name HAMAMATSU, SHIGEYUKI
Address ONE MARKET PLAZA, STEUART
 TOWER, SUITE 700
City-State-Zip: SAN FRANCISCO CA 94105

Title VP
Name RUDER, DAVID
Address ONE MARKET PLAZA, STEUART
 TOWER, SUITE 700
City-State-Zip: SAN FRANCISCO CA 94105

Title ASST. SECRETARY
Name SHIMOMOTO, PAUL
Address 737 BISHOP STREET, SUITE 2100
City-State-Zip: HONOLULU HI 96813

Title DIRECTOR
Name AMSTER, JOHN A
Address ONE MARKET PLAZA, STEUART
 TOWER, SUITE 700
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR
Name YEN, MALLUN
Address ONE MARKET PLAZA, STEUART
 TOWER, SUITE 700
City-State-Zip: SAN FRANCISCO CA 94105

Title DIRECTOR, SECRETARY
Name ROBERTS, MARTIN
Address ONE MARKET PLAZA, STEUART
 TOWER, SUITE 700
City-State-Zip: SAN FRANCISCO CA 94105

Title ASST. TREASURER
Name KAMAKA, CHRISTINA
Address 201 MERCHANT STREET, SUITE 2400
City-State-Zip: HONOLULU HI 96813

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: CHRISTINA KAMAKA**ASSISTANT TREASURER 04/04/2013**

Electronic Signature of Signing Officer/Director Detail

Date