

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000005213

**Entity Name:** INNOVATIVE RISK MANAGEMENT, INC.

**Current Principal Place of Business:**

1001 ESE LOOP 323, SUITE 350  
TYLER, TX 75701

**Current Mailing Address:**

1001 ESE LOOP 323, SUITE 350  
TYLER, TX 75701

**FEI Number: 75-2395840**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CPT  
Name STAGNER, STUART R  
Address 1431 GREENWAY DRIVE SUITE 620  
City-State-Zip: IRVING TX 75038

Title VCP  
Name HAGER, DUANE  
Address 1431 GREENWAY DRIVE SUITE 620  
City-State-Zip: IRVING TX 75038

Title S  
Name HAGER, DUANE  
Address 1431 GREENWAY DRIVE SUITE 620  
City-State-Zip: IRVING TX 75038

Title VP  
Name DAVALT, ED  
Address 1001 ESE LOOP 323, SUITE 350  
City-State-Zip: TYLER TX 75701

Title VP  
Name HAMMAN, LISA K  
Address 1001 ESE LOOP 323, SUITE 350  
City-State-Zip: TYLER TX 75701

*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: LISA HAMMAN**

**VICE PRESIDENT**

**04/29/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date