2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117122

PREFERRED PROPERTY RISK PURCHASING GROUP, INC.

FILED Feb 03, 2009 Secretary of State

Entity Nar	me: PREFER	RED PROPERTY RISK PUR	CHASING (GROUP, IN	C.	
Current Principal Place of Business:				New Principal Place of Business:		
C/O JGS INSURANCE 960 HOLMDEL RD. HOLMDEL, NJ 077330409				C/O JGS INSURANCE 960 HOLMDEL RD. HOLMDEL, NJ 07733		
Current Mailing Address:				New Mailing Address:		
C/O JGS INSURANCE 960 HOLMDEL RD. HOLMDEL, NJ 077330409				C/O JGS INSURANCE 960 HOLMDEL RD. HOLMDEL, NJ 07733		
FEI Number:	: 22-3782474	FEI Number Applied For ()	FEI Num	ber Not Appl	icable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1201 HAYS	CUMENT SER S STREET SSEE, FL 323					
	named entity of Florida.	submits this statement for the	e purpose of	changing i	ts registered	office or registered agent, or both,
SIGNATUR	RE:					
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	HAGER, VINCE 7 MARC RD) Delete ENT J BRANCH, NJ 07764		Title: Name: Address: City-St-Zip:	HAGER, KEN 22 ORLA COL	
Title: Name:	() Delete		Title: Name:	CEO (KANE, STEPH) Change (X) Addition HEN J

Title: () Delete

Address:

Name:

Address:

City-St-Zip:

Title: S&T () Change (X) Addition Name: HAGER, VINCENT J

Address:

City-St-Zip:

Address: 7 MARC ROAD

110 STOUT DRIVE MIDDLETOWN, NJ 07748 US

City-St-Zip: City-St-Zip: WEST LONG BRANCH, NJ 07764 US

I hereby certify that the information supplied with this filing does not qualify 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: KENNETH L. HAGER P 02/03/2009