

No. <b>C 161670</b>		<b>Due no later than Jul 31, 2010</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> FIRST NIAGARA RISK MANAGEMENT, INC. SARAH M JAROSZ 726 EXCHANGE ST STE 900 BUFFALO NY 14210-7010 USA		CORPORATION SERVICE COMPANY 1401 SHORELINE DRIVE STE 2 BOISE ID 83702			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	DANIEL E CANTARA	726 EXCHANGE STREET SUITE 900	BUFFALO	NY	USA	14210	
TREASURER	MICHAEL W HARRINGTON	726 EXCHANGE STREET SUITE 900	BUFFALO	NY	USA	14210	
DIRECTOR	JOHN R KOELMEL	726 EXCHANGE STREET SUITE 900	BUFFALO	NY	USA	14210	
SECRETARY	JOHN MINEO	726 EXCHANGE STREET SUITE 900	BUFFALO	NY	USA	14210	
PRESIDENT	JOSEPH R TERESI	726 EXCHANGE STREET SUITE 900	BUFFALO	NY	USA	14210	
5. Organized Under the Laws of:  <b>NY C 161670</b>		6. Annual Report must be signed.* Signature: Sarah Jarosz Name (type or print): Sarah Jarosz Date: 05/17/2010 Title: Licensing Coordinator					
Processed 05/17/2010		* Electronically provided signatures are accepted as original signatures.					