No. C 161670  Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Jul 31, 2009 Annual Report Form  1. Mailing Address: Correct in this box if needed.  FIRST NIAGARA RISK MANAGEMENT, INC. SARAH M JAROSZ 726 EXCHANGE ST STE 900 BUFFALO NY 14210-7010 USA		2. Registered A	Registered Agent and Address (NO PO BOX)  CORPORATION SERVICE COMPANY 1401 SHORELINE DRIVE STE 2 BOISE ID 83702  3. New Registered Agent Signature:*			
				1401 SHORI BOISE ID				
4. Corporations: Enter Na	ames and Busin	ess Addresses of F	resident, Secretary, and Directors. Trea	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	The state of the s		726 EXCHANGE STREET SUITE		NY	USA	14210	
		HARRINGTON	726 EXCHANGE STREET SUITE		NY	USA	14210	
DIRECTOR JOHN R KOR			726 EXCHANGE STREET SUITE		NY	USA	14210	
SECRETARY JOHN MINEC PRESIDENT JOSEPH R 1			726 EXCHANGE STREET SUITE 726 EXCHANGE STREET SUITE		NY NY	USA USA	14210 14210	
5 Organized Under the	Laws of	6 Appual Peport	must be signed *					
5. Organized Under the Laws of:		6. Annual Report must be signed.*		D.1	D-1 0F (22 (2000			
NY		Signature: Sarah M. Jarosz			Date: 05/22/2009			
C 161670		Name (type or print): Sarah M. Jarosz		Title:	Title: License Coordinator			
Processed 05/22/2009		* Electronically pr	ovided signatures are accepted as origin	al signatures.				