

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000267

FILED
May 02, 2008
Secretary of State

Entity Name: CREDIT SUISSE PREMIUM FINANCE LLC

Current Principal Place of Business:

11 MADISON AVENUE
CORP TAX DEPT
NEW YORK, NY 10010

New Principal Place of Business:

Current Mailing Address:

11 MADISON AVENUE
CORP TAX DEPT
NEW YORK, NY 10010

New Mailing Address:

FEI Number: 06-1791236 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: BEROY, PEDRO
Address: 11 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Delete
Name: KAPLAN, ANDREW J
Address: 11 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: MGR (X) Change () Addition
Name: BURKE, DARRYL J
Address: 11 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: MGR () Delete
Name: FITZGERALD, DANIEL P
Address: 11 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Delete
Name: ROSEMAN, DOUGLAS VP
Address: 11 MADISON AVENUE, 8 FLOOR
City-St-Zip: NEW YORK, NY 10010

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: MCALLISTER, IAN G
Address: 11 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DOUGLAS ROSEMAN

MGR

05/02/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date