

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000267

FILED  
Apr 21, 2009  
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 ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

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:**

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

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

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

**ADDITIONS/CHANGES:**

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

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

Title: MGR (X) Change ( ) Addition  
Name: FITZGERALD, DAN P  
Address: 11 MADISON AVENUE  
City-St-Zip: NEW YORK, NY 10010

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

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

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

04/21/2009

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