

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001891

Entity Name: WS INSURANCE SERVICES, LLC

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

901 E. BYRD STREET  
RICHMOND, VA 23219

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CORPORATION SERVICE COMPANY  
2711 CENTERVILLE RD., SUITE 400  
WILMINGTON, DE 19808

**New Mailing Address:**

FEI Number: 54-0910269      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: RANDA, RICHARD G  
Address: 901 E. BYRD STREET, WS 6005  
City-St-Zip: RICHMOND, VA 23219

Title: MGR ( ) Delete  
Name: VORLOP, ROBERT W  
Address: 901 E. BYRD STREET, WS 6005  
City-St-Zip: RICHMOND, VA 23219

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

**ADDITIONS/CHANGES:**

Title: MGRP (X) Change ( ) Addition  
Name: RANDA, RICHARD G  
Address: 901 E. BYRD STREET, WS 6005  
City-St-Zip: RICHMOND, VA 23219

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

Title: AVP ( ) Change (X) Addition  
Name: JACKSON, BEVERLY W  
Address: 301 SOUTH COLLEGE STREET  
City-St-Zip: CHARLOTTE, NC 28288

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: BEVERLY W. JACKSON

AVP

04/28/2009

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