2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# M05000005757

Entity Name: BEECHER CARLSON INSURANCE AGENCY, LLC

Current Principal Place of Business:

220 NW SECOND AVENUE, SUITE 800
PORTLAND, OR 97209

New Principal Place of Business:

Current Mailing Address:

220 NW SECOND AVENUE, SUITE 800
PORTLAND, OR 97209

New Mailing Address:

FEI Number: 81-0669367 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: MGRM ( ) Delete
Name: BEECHER CARLSON HOLD, INGS, INC
Address: 2002 SUMMIT BLVD STE 925
City-St-Zip: ATLANTA, GA 30319

ADDITIONS/CHANGES:

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: CHRISTINE ALLIGOOD AS 04/21/2008

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