

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000002996

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** STARR GLOBAL ACCIDENT AND HEALTH INSURANCE AGENCY, LLC

**Current Principal Place of Business:**

THREE GREENWICH OFFICE PARK  
51 WEAVER STREET  
GREENWICH, CT 06831

**New Principal Place of Business:**

399 PARK AVENUE  
9TH FLOOR  
NEW YORK, NY 10022

**Current Mailing Address:**

THREE GREENWICH OFFICE PARK  
51 WEAVER STREET  
GREENWICH, CT 06831

**New Mailing Address:**

399 PARK AVENUE  
9TH FLOOR  
NEW YORK, NY 10022

FEI Number: 20-8068222

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  
Name: BLAKEY, STEVEN  
Address: 3353 PEACHTREE ROAD N.E., SUITE 1000  
City-St-Zip: ATLANTA, GA 30326

Title: MGR  
Name: ROTH, SCOTT  
Address: 399 PARK AVE, 8TH FL  
City-St-Zip: NEW YORK, NY 10022

Title: MGR  
Name: MCGUIRE, PETER  
Address: 51 WEAVER STREET  
City-St-Zip: GREENWICH, CT 06831

I hereby 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: STEVEN BLAKEY

MGR

04/22/2010

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