2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# 846967

Entity Name: LM PERSONAL INSURANCE COMPANY

Current Principal Place of Business:

1209 ORANGE STREEET
WILMINGTON, DE 19801 US

New Principal Place of Business:

Current Mailing Address:

175 BERKELEY STREET
10-B
BOSTON, MA 02116 US

New Mailing Address:

FEI Number: 22-2227331 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: DILLON, MARGARET
Address: 175 BERKELEY STREET
City-St-Zip: BOSTON, MA 02116

Title: CEOP ( ) Delete
Name: CONDRIN, J. PAUL III
Address: 175 BERKELEY STREET
City-St-Zip: BOSTON, MA 02116

Title: VS ( ) Delete
Name: LEGG, DEXTER R
Address: 175 BERKELEY STREET
City-St-Zip: BOSTON, MA 02116

Title: CFO ( ) Delete
Name: LANGWELL, DENNIS J
Address: 175 BERKELEY STREET
City-St-Zip: BOSTON, MA 02116

Title: VPT ( ) Delete
Name: YAHIA, LAURANCE
Address: 175 BERKELEY STREET
City-St-Zip: BOSTON, MA 02116

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: ASEC ( ) Change (X) Addition
Name: BAINTON, DIANE
Address: 175 BERKELEY STREET
City-St-Zip: BOSTON, MA 02116

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE S BAINTON ASEC 04/25/2005

Electronic Signature of Signing Officer or Director — Date