

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006010

FILED
Jan 10, 2006
Secretary of State

Entity Name: WILLIS INSURANCE SERVICES OF GEORGIA, INC.

Current Principal Place of Business:

C/O HOLLY GAY YOUNG
26 CENTURY BLVD
NASHVILLE, TN 37214

New Principal Place of Business:

Current Mailing Address:

C/O HOLLY GAY YOUNG
26 CENTURY BLVD
NASHVILLE, TN 37214

New Mailing Address:

FEI Number: 58-1704046 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: POLLAN, LYNN E
Address: 26 CENTURY BLVD
City-St-Zip: NASHVILLE, TN 37214

Title: DVP () Delete
Name: CAIAZZO, MARY E
Address: 7 HANOVER SQUARE
City-St-Zip: NEW YORK, NY 10004

Title: D () Delete
Name: COAXUM, WOLE
Address: 7 HANOVER SQUARE
City-St-Zip: NEW YORK, NY 10004

Title: P () Delete
Name: ROBERTSON, DAVID L
Address: ONE GLENLAKE PKWY, 11TH FL
City-St-Zip: ATLANTA, GA 30328

Title: S () Delete
Name: YOUNG, HOLLY GAY
Address: 26 CENTURY BLVD
City-St-Zip: NASHVILLE, TN 37214

Title: T () Delete
Name: MOONEY, C. WILLIAM
Address: 26 CENTURY BLVD
City-St-Zip: NASHVILLE, TN 37214

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AS (X) Change () Addition
Name: NAAKTGEBOREN, HEATHER
Address: 26 CENTURY BLVD
City-St-Zip: NASHVILLE, TN 37214

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

Title: D (X) Change () Addition
Name: VITALE, MARIO P
Address: 7 HANOVER SQUARE
City-St-Zip: NEW YORK, NY 10004

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

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 for the exemption stated in Chapter 119, 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: HEATHER D. B. NAAKTGEBOREN

AS

01/10/2006

Electronic Signature of Signing Officer or Director

_____ Date