## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000006010

Entity Name: WILLIS INSURANCE SERVICES OF GEORGIA, INC.

FILED Jan 03, 2008 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
C/O HOLLY GAY MURPHY 26 CENTURY BLVD NASHVILLE, TN 37214						
Current Mailing Address:			New Mailir	New Mailing Address:		
26 CENTUR	GAY MURPH RY BLVD E, TN 37214	Y				
FEI Number:	58-1704046	FEI Number Applied For ( )	El Number Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
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:						
		c Signature of Registered Agent			Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS	AND DIRECT	ORS:	ADDITION	S/CHANGES	TO OFFICERS AND DIRECTO	RS:
Title: Name: Address: City-St-Zip:	AS () I NAAKTGEBOREI 26 CENTURY BL NASHVILLE, TN	VD	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DVP () I CAIAZZO, MARY 7 HANOVER SQU NEW YORK, NY	JARE	Title: Name: Address: City-St-Zip:	CAIAZZO, MAF	FINANCIAL CENTER, 200 LIBERTY ST	
Title: Name: Address: City-St-Zip:	D () I BAILEY, DONAL 7 HANOVER SQU NEW YORK, NY	JARE	Title: Name: Address: City-St-Zip:	BAILEY, DONA	FINANCIAL CENTER, 200 LIBERTY ST	
Title: Name: Address: City-St-Zip:	ROBERTSON, D	PKWY, 11TH FL	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	S () I MURPHY, HOLL' 26 CENTURY BL NASHVILLE, TN	VD	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () I MOONEY, C. WI 26 CENTURY BL NASHVILLE, TN	VD	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	

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 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: HOLLY GAY MURPHY SECR 01/03/2008