2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005654

Entity Name: ROYAL & SUNALLIANCE INSURANCE AGENCY, INC.

FILED Feb 25, 2008 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
WALL STRE 88 PINE ST NEW YORK	REET, 17TH F	LOOR				
Current Mailing Address:			New Mailin	New Mailing Address:		
WALL STRE 88 PINE ST NEW YORK	REET, 17TH F	LOOR				
FEI Number: 1	11-3723330	FEI Number Applied For () FE	El Number Not Applic	cable () Certifica	te of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:						
	Electronic	Signature of Registered Agent			Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	BROOME, DAVID	WAY, FARNHAM COMMON	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	STD () E HENGSTELER, S 6981 HAMPTON CASTLE ROCK, O	COURT	Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	LATHAM, ANTHO	INYMEAD DR/E. HURSLEY, SURRETY	Title: Name: Address: City-St-Zip:	D (X) Change (KAY, STEWART 101 LOWER ROAD, CHAI GERRARDS CROSS, ENG	FONT ST PETER	
Title: Name: Address: City-St-Zip:	VD () [MCMULLEN, ROI 742 TALL OAKS BRICK, NJ 0872	DRIVE	Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	PD () E MONCUR, ALISO 45 WILRIDGE RO WILTON, CT 068	DAD	Title: Name: Address: City-St-Zip:	()Change() Addition	
Title: Name: Address: City-St-Zip:	VD () E BATT, THOMAS 19470 STONEBR WESTON, FL 33		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: SHELLY HENGSTELER SEC 02/25/2008