2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005654

Entity Name: ROYAL & SUNALLIANCE INSURANCE AGENCY, INC.

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
WALL STREET PLAZA 88 PINE STREET, 17TH FLOOR NEW YORK, NY 10005						
Current Mailing Address:			New Mailir	New Mailing Address:		
WALL STREET PLAZA 88 PINE STREET, 17TH FLOOR NEW YORK, NY 10005						
FEI Number:	11-3723330	FEI Number Applied For ()	FEI Number Not Appli	cable ()	Certificate 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:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BROOME, DAVII	WAY, FARNHAM COMMON	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	STD () HENGSTELER, \$6981 HAMPTON CASTLE ROCK,	COURT	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	KAY, STEWART 101 LOWER RO	Delete AD, CHALFONT ST PETER OSS, ENGLAND, UK SL98JZ UK	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VD () I MCMULLEN, RO 742 TALL OAKS BRICK, NJ 0872	DRIVE	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	PD () I MONCUR, ALISO 45 WILRIDGE R WILTON, CT 06	OAD	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VD () BATT, THOMAS 19470 STONEBF WESTON, FL 33		Title: Name: Address: City-St-Zip:	CONCHA, FERN	SS CORPORATE PARKWAY #100	

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 01/21/2009