SIGNATURE:

SIGNATURE AND TYPED CO. PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 16, 2007 8:00 am Secretary of State

404-443-4947

Daytime Phone #

DOCUMENT # F0600007782 1. Entity Name CATLIN, INC.								07-16-2007	90123 0	42 ***15	50.00
Principal Place	e of Business	s	Mailing Address ,				-				
400 POYDRAS STREET STE 2620 New Orleans, la 70130			400 POYDRAS STREET STE 2620 NEW ORLEANS, LA 70130				11881188 11	II FBICB BISII BBIII BBIII BBIIK I			(1 4 p i ik 1 44 i
2. Principal Place of Business - No P.O. Box #			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				07032007	Chg-P	CR2E03	4 (12/06)	
City & State			City & State				4. FEI Numb	-14583∞	ļ	<u>'</u>	plied For at Applicable
Zip		Country	Zip	Zip Country			5. Certificate	of Status Desired		8.75 Add ee Require	
	6. Name	and Address of Current I	Registered Agent	Name		7. Name and	d Address of New Re	gistered A	gent		
CORPORATION SERVICE COMPANY											
1201 HAYS	S STREET			Street Address (P.O. Box Number is Not Acceptable)							
					City				FL	Zip Code	8
8. 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. am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required								*	DATE		
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007 9. Election Campaign Finan Trust Fund Contribution.							.00 May Be ed to Fees	In accordance wi corporation did n			
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS	CHANGES TO OFFIC	ERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-SI-ZIP	C Delete Tife CATLIN, STEPHEN 6TH FLOOR, 3 MINSTER COURT, MINCING LANE LONDON EC3R 7DD ENGLAND, CIT									☐ Change	☐ Addition
TITLE	DP Delete TITL				E					Change	Addition
NAME STREET ADDRESS	- · · · · · · · · · · · · · · · · · · ·				et address						
CITY-ST-ZIP											,
TITLE	DVST 🛂 Delete 1117L					VPa	and Gene	ral Counsel	(DVS)	Change	Addition
NAME STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·					3340	ve A-DA	ms road N.E.	. Suite	2950	
CITY-ST-ZIP						ATLA	nTa. AA	30326			/
TITLE	D		Delete	TITL	£	Chi	et finar	sperin	(a)	☐ Change	Addition
NAME STREET ADDRESS	l	EIN, KENNETH F OW LANE NORTH		NAM	et address	Pet	ier Mes	ree Road N	E 50	ire 25	50
CITY-ST-ZIP	1	D, NJ 07436	/		-ST-ZIP	ATI	anta G	coraia 303	20	,,,,,,	,
TITLE	D		Delete	TITL	E	Dire	ector	(0)		☐ Change	Addition
NAME	MOSS, EDWARD					Roos	ert Gow	dy ee lood NE . :	SULTE	2957)	
STREET ADDRESS 6TH FLOOR, 3 MINSTER COURT, MINCING LANE CITY-ST-ZIP LONDON EC3R 7DD ENGLAND,						1 2 1		eorgia 303		6430	
TITLE	D		☐ Delete	TITL	E	1,,,,,	<u> </u>	<u> </u>		☐ Change	Addition
NAME STREET ADDRESS					ET ADDOCCC						ĺ
STREET ADDRESS 6TH FLOOR, 3 MINSTER COURT, MINCING LANE CITY-ST-ZIP LONDON EC3R 7DD ENGLAND,					EET ADDRESS -S1-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											