

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000287

FILED  
Mar 02, 2011  
Secretary of State

**Entity Name:** DEUTSCHE BANK INSURANCE AGENCY INCORPORATED

**Current Principal Place of Business:**

1 SOUTH STREET  
21ST FLOOR  
BALTIMORE, MD 21202 US

**New Principal Place of Business:**

**Current Mailing Address:**

SONJA OLSEN C/O DEUTSCHE BANK  
60 WALL STREET, NYC60-4006  
NEW YORK, NY 10005 US

**New Mailing Address:**

**FEI Number:** 52-1446575      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** NALL, TERRY W  
**Address:** 3414 PEACHTREE ROAD NE  
**City-St-Zip:** ATLANTA, GA 30326 US

**Title:** S  
**Name:** OLSEN, SONJA K  
**Address:** 60 WALL STREET  
**City-St-Zip:** NEW YORK, NY 10005 US

**Title:** T  
**Name:** KALAJIAN, STEPHEN  
**Address:** 60 WALL STREET  
**City-St-Zip:** NEW YORK, NY 10005 US

I hereby 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 all other like empowered.

SIGNATURE: SONJA K OLSEN

S

03/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date