2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2010
Secretary of State

DOCUMENT# F97000001282

Entity Name: NYLINK INSURANCE AGENCY INCORPORATED

Current Principal Place of Business:

51 MADISON AVENUE
NEW YORK, NY 10010

New Principal Place of Business:

Current Mailing Address:

51 MADISON AVENUE
NEW YORK, NY 10010

New Mailing Address:

FEI Number: 13-3929029 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PCEO
Name: ROCCHI, GERARD A
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: VPS
Name: MARRION, CATHERINE A
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: VPT
Name: WITTERSCHEIN, RICHARD J
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: DIR
Name: BLUNT, CHRISTOPHER O
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: DIR
Name: CULLEN, JOHN A
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

Title: DIR
Name: SENKEN, MICHAEL J
Address: 51 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10010

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: ANNE MEYER POA 04/09/2010

Electronic Signature of Signing Officer or Director Date