2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067875

PURCHASE, NY 10577 US

City-St-Zip:

FILED Jul 05, 2005 Secretary of State

Entity Name: ALTERNATIVE INVESTMENT INSURANCE AGENCY LLC

Current Principal Place of Business:			New Principal F	New Principal Place of Business:		
4 MANHA	TTANVILLE RO	AD				
	SE, NY 10577	US				
Current Mailing Address:			New Mailing Ad	New Mailing Address:		
4 MANHATTANVILLE ROAD SUITE 103						
	SE, NY 10577	US				
	: 20-1568788 ice with s. 607.193	FEI Number Applied For() (2)(b), F.S., the limited liability co	FEI Number Not Applicable impany did not receive the prior			
Name and	d Address of C	urrent Registered Agent:	Name and Addr	ess of New Registered Agent:		
#1024	RISTINA T GRAND RESI ATER, FL 3375					
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its regi	stered office or registered agent, or both		
SIGNATU	RE:					
	Electroni	c Signature of Registered Ag	jent	Date		
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANG	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	RAQUET, WALT	LLE ROAD, SUITE 103	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address:	ANDERSON, JÓ	Delete HN LLE ROAD, SUITE 103	Title: Name: Address:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

City-St-Zip:

SIGNATURE: JOHN ANDERSON MGRM 07/05/2005