

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005431

FILED
Jan 29, 2007
Secretary of State

Entity Name: PAGET INSURANCE AGENCY, LLC

Current Principal Place of Business:

5080 SPECTRUM DRIVE
SUITE 900 EAST
ADDISON, TX 75001

New Principal Place of Business:

Current Mailing Address:

5080 SPECTRUM DRIVE
SUITE 900 EAST
ADDISON, TX 75001

New Mailing Address:

FEI Number: 59-3593889

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ASHLEY, WILLIAM J
Address: 5080 SPECTRUM DRIVE, SUITE 900 EAST
City-St-Zip: ADDISON, TX 75001

Title: MGR () Delete
Name: HEATHERLY, DAVID A
Address: 5080 SPECTRUM DRIVE, SUITE 900 EAST
City-St-Zip: ADDISON, TX 75001

Title: MGR () Delete
Name: PRIMERANO, RICHARD B
Address: 5080 SPECTRUM DRIVE, SUITE 900 EAST
City-St-Zip: ADDISON, TX 75001

Title: MGRM () Delete
Name: GLENCOE U.S. HOLDING, S INC.
Address: 5080 SPECTRUM DRIVE, SUITE 900 EAST
City-St-Zip: ADDISON, TX 75001

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: GLENCOE U.S. HOLDINGS INC.

AS

01/29/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date