

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90137 024 ****50.00

DOCUMENT # M00000001883

1. Entity Name
AFCO PREMIUM CREDIT LLC



Principal Place of Business
**110 WILLIAM ST., 29TH FLOOR
NEW YORK, NY 10038**

Mailing Address
**110 WILLIAM ST., 29TH FLOOR
NEW YORK, NY 10038**

20001827



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102006 Chg-LLC CR2E083 (11/05)

4. FEI Number
25-1870055

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I 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 when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE PD
NAME ZUPAN, DARYL J ☐ Delete
STREET ADDRESS 110 WILLIAM ST.
CITY-ST-ZIP NEW YORK, NY 10038

TITLE VS
NAME RATNER, ROBERT J ☐ Delete
STREET ADDRESS 110 WILLIAM ST.
CITY-ST-ZIP NEW YORK, NY 10038

TITLE VT
NAME GOLD, BRUCE R ☐ Delete
STREET ADDRESS TWO MELLON BANK CENTER, SUITE 300
CITY-ST-ZIP PITTSBURGH, PA 15259

TITLE V
NAME HICKEY, DAVID P ☐ Delete
STREET ADDRESS TWO MELLON BANK CENTER, SUITE 300
CITY-ST-ZIP PITTSBURGH, PA 15259

TITLE V
NAME FOX, HAROLD J ☐ Delete
STREET ADDRESS 110 WILLIAM ST.
CITY-ST-ZIP NEW YORK, NY 10038

TITLE D ☒ Delete
NAME MIGLIACCIO, GUY R
STREET ADDRESS 1166 AVE. OF THE AMERICAS
CITY-ST-ZIP NEW YORK, NY 10031

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Raymond P. Walsh
STREET ADDRESS 1166 Avenue of the Americas
CITY-ST-ZIP New York, NY 10031

11. 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 is true and accurate and that my 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:

Daryl J. Zupan

1/23/06

412-234-2472

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #