

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002619

FILED  
Feb 28, 2008  
Secretary of State

Entity Name: PARTNERS SPECIALTY GROUP, LLC

**Current Principal Place of Business:**

BENTWOOD EXECUTIVE CAMPUS  
301 E. GERMANTOWN PIKE, SUITE 402  
NORRISTOWN, PA 19401

**New Principal Place of Business:**

**Current Mailing Address:**

BENTWOOD EXECUTIVE CAMPUS  
301 E. GERMANTOWN PIKE, SUITE 402  
NORRISTOWN, PA 19401

**New Mailing Address:**

FEI Number: 23-3062063      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCDONALD, JANET C  
6940 SE CONGRESS  
HOBE SOUND, FL 33455      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: MGRM ( ) Delete  
Name: MCDONNELL, DANIEL P CHAIRMA  
Address: 301 E. GERMANTOWN PIKE, STE 402  
City-St-Zip: NORRISTOWN, PA 19401 US

Title: MGRM ( ) Delete  
Name: CAVISTON, MAUREEN C PRESIDE  
Address: 186 SADDLE HILL ROAD  
City-St-Zip: STAMFORD, CT 06903 US

Title: MGRM ( ) Delete  
Name: CORVIN, SARAH L EVP  
Address: 231 SURFVIEW DRIVE  
City-St-Zip: PACIFIC PALISADES, CA 90272 US

Title: MGRM ( ) Delete  
Name: GRAFSTEIN, DAVID EVP  
Address: 49 HEMMING WAY  
City-St-Zip: STAMFORD, CT 06903 US

Title: MGRM ( ) Delete  
Name: PATTERSON, MARK E EVP  
Address: 1236 W. 57TH STREET  
City-St-Zip: KANSAS CITY, MO 64113 US

Title: MGRM ( ) Delete  
Name: ROTTER, MARC EVP  
Address: 9623 WENDOVER DRIVE  
City-St-Zip: BEVERLY HILLS, CA 90210 US

**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:

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 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: DANIEL P. MCDONNELL

CHAI

02/28/2008

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