2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001898

FILED Apr 30, 2009 Secretary of State

Entity Name: ALLIED NORTH AMERICA INSURANCE BROKERAGE OF WASHINGTON D.C., LLC

Current Principal Place of Business: New Principal Place of Business:

1730 RHODE ISLAND AVE., N.W., STE. 601 390 N BROADWAY WASHINGTON, DC 20036 NEW YORK, NY 11753

Current Mailing Address: New Mailing Address:

390 N. BROADWAY
JERICHO, NY 11753

390 N BROADWAY
NEW YORK, NY 11753

FEI Number: 82-0581861 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331 US

MANAGING MEMBERS/MANAGERS:

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

Electronic Signature of Registered Ager

ADDITIONS/CHANGES:

R () Delete Title: CEO (X) Change () Addition

 Name:
 MARINO, WILLIAM A
 Name:
 MARINO, WILLIAM A

 Address:
 390 N. BROADWAY
 Address:
 390 N BROADWAY

 City-St-Zip:
 JERICHO, NY 11753
 City-St-Zip:
 JERICHO, NY 11753

Title: MGR () Delete Title: COO (X) Change () Addition Name: LOMBARDI, HENRY C Name: LOMBARDI, HENRY C

 Address:
 390 N. BROADWAY
 Address:
 390 N BROADWAY

 City-St-Zip:
 JERICHO, NY 11753
 City-St-Zip:
 JERICHO, NY 11753

Title: MGR () Delete Title: CFO (X) Change () Addition Name: MCGANN, PETER M Name: MCGANN, PETER M

 Address:
 390 N. BROADWAY
 Address:
 390 N BROADWAY

 City-St-Zip:
 JERICHO, NY 11753
 City-St-Zip:
 JERICHO, NY 11753

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 MAINELLO, STEPHEN
 Name:

 Address:
 1730 RHODE ISLAND AVE., N.W., STE. 601
 Address:

 City-St-Zip:
 WASHINGTON, DC 20036
 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: WILLIAM A MARINO CEO 04/30/2009