

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002117

FILED  
Jul 21, 2004  
Secretary of State

Entity Name: BACHE INSURANCE AGENCY, LLC

## Current Principal Place of Business:

60 WALNUT STREET  
WELLESLEY, MA 02181

## New Principal Place of Business:

199 WATER STREET  
NEW YORK, NY 10292

## Current Mailing Address:

60 WALNUT STREET  
WELLESLEY, MA 02181

## New Mailing Address:

C/O CORPORATION SERVICE COMPANY  
2711 CENTERVILLE ROAD, SUITE 400  
WILMINGTON, DE 19808

FEI Number: 11-2294357

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:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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: BRIAN COURTNEY, ASSISTANT VICE PRESIDENT

07/21/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: PRUDENTIAL SECURITIE, S INCORPORATED  
Address: 199 WATER STREET  
City-St-Zip: NEW YORK, NY 10292

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: HERRMANN, ROBERT P MANAGER  
Address: 901 E. BYRD STREET  
City-St-Zip: RICHMOND, VA 23219

Title: MGR ( ) Change (X) Addition  
Name: LOVERRO, ROBERT A MANAGER  
Address: 1 NEW YORK PLAZA  
City-St-Zip: NEW YORK, NY 10292

Title: MGR ( ) Change (X) Addition  
Name: WILDE, WILLIAM A MANAGER  
Address: 1 NEW YORK PLAZA  
City-St-Zip: NEW YORK, NY 10292

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.

SIGNATURE: ROBERT P. HERRMANN

MGR

07/21/2004

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