2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000002971

1. Entity Name
AGLA SERVICES COMPANY LLC

458

Principal Place of Business
~~499~~N. AMERICAN GENERAL CENTER
NASHVILLE, TN 37250

458

Mailing Address
~~486~~N. AMERICAN GENERAL CENTER
NASHVILLE, TN 37250

FILED
05 MAR 17 AM 7:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03112005 No Chg-LLC CR2E083 (10/03)

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4. FEI Number
32-0121807

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

100048595741

458

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MALLON, JIM
STREET ADDRESS	~~499~~N. AMERICAN GENERAL CENTER
CITY-ST-ZIP	NASHVILLE, TN 37250
TITLE	Mgr. (Assistant Secretary)
NAME	McFadden, Charlene
STREET ADDRESS	2929 Allen Parkway, A40-04
CITY-ST-ZIP	~~Houston, TX 77019~~
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify 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 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 Charlene McFadden 3/14/05 (713) 522-1111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

CORPORATION SERVICE COMPANY

M04000002971

ACCOUNT NO. : 072100000032

REFERENCE : 261540 4712600

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 50.00

FILED
05 MAR 17 AM 7:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : March 16, 2005

ORDER TIME : 9:22 AM

ORDER NO. : 261540-005

CUSTOMER NO: 4712600

CUSTOMER: Ann Wohn
American General Life
2929 Allen Parkway
Suite A 40-04
Houston, TX 77019

RECEIVED
05 MAR 17 AM 10:43
DIVISION OF CORPORATION

ANNUAL REPORT FILING

NAME: AGLA SERVICES COMPANY LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 2956

EXAMINER'S INITIALS: _____