

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000006187

Entity Name: ILS MANAGEMENT LLC

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

6767 N WICKHAM RD STE 305
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

6767 N WICKHAM RD STE 305
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 75-3113250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLELLAND, PATRICIA A
6767 N WICKHAM RD STE 305
MELBOURNE, FL 32940 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: MGR () Delete
Name: MCLELLAND, PATRICIA A
Address: 100 HIGHLAND PARK VILLAGE STE 200
City-St-Zip: DALLAS, TX 75205

Title: MGR () Delete
Name: GRAHAM, MICHAEL L
Address: 100 HIGHLAND PARK VILLAGE STE 200
City-St-Zip: DALLAS, TX 75205

Title: MGR () Delete
Name: BETSY M BLATTMACHR T, RUST
Address: 1029 W 3RD AVE STE 601
City-St-Zip: ANCHORAGE, AK 99501

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: GRAHAM, MICHAEL L
Address: 100 HIGHLAND PARK VILLAGE STE 200
City-St-Zip: DALLAS, TX 75205

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: PATRICIA A MCLELLAND

MGR

01/07/2008

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