

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000000779

FILED
Jan 20, 2007
Secretary of State

Entity Name: SELECTECH, LLC

Current Principal Place of Business:

40 WANTAGE AVENUE
BRANCHVILLE, NJ 07890

New Principal Place of Business:

Current Mailing Address:

ATTN: CORPORATE LEGAL
40 WANTAGE AVE
BRANCHVILLE, NJ 07890

New Mailing Address:

FEI Number: 22-3600767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: SELECTIVE INSURANCE, CO OF SOUTHEAST
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: MGRM () Delete
Name: SELECTIVE WAY INSURANCE, NCE COMPANY
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: MGR () Delete
Name: LANZA, MICHAEL
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: MGR () Delete
Name: MCCONVERY, KELLY
Address: 40 WANTAGE AVE.
City-St-Zip: BRANCHVILLE, NJ 07890

Title: MGR (X) Delete
Name: THATCHER, DALE A
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: MGR (X) Delete
Name: DREW, JAMES
Address: 40 WANTAGE AVE.
City-St-Zip: BRANCHVILLE, NJ 07890

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LANZA, MICHAEL H
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: MGRM (X) Change () Addition
Name: THATCHER, DALE A
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: MGR (X) Change () Addition
Name: MCCONVERY, KELLY
Address: 40 WANTAGE AVENUE
City-St-Zip: BRANCHVILLE, NJ 07890

Title: MGR (X) Change () Addition
Name: DREW, JAMES A
Address: 6920 PROFESSIONAL PARKWAY EAST
City-St-Zip: SARASOTA, FL 34240

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 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: KELLY MCCONVERY

MGRM

01/20/2007

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