2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

03-05-2007 90053 005 ***150.00
P26699

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SECRETARY OF STATE

DOCUMENT # P26699

1. Entity Name
REDLAND INSURANCE COMPANY

Principal Place of Business	Mailing Address
224 W STATE ST TRENTON NJ 08608	7 TIMES SQUARE 36 AND 37 FLOORS NEW YORK NY 10036 US

1st MOORE CR2E034 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
7 Times Square	
Suite, Apt. #, etc. 37th floor	Suite, Apt. #, etc.
City & State New York, NY	City & State
Zip 10036	Country USA
	Zip
	Country

4. FEI Number 42-1113749 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE FL 32399-0000	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BIANEK, TIMOTHY 7 TIMES SQUARE NEW YORK NY 10036	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Richard Jeffreys 7 Times Square New York, NY 10036	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KETELS, GERHARD 7 TIMES SQUARE NEW YORK NY 10036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCD FOX, RODMAN 7 TIMES SQUARE NEW YORK NY 10036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Susan Rivera 7 Times Square New York, NY 10036	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	$3/8	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Gerhard Ketels 212-805-9700 2/15/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #