

No. <b>C 159024</b>		<b>Due no later than Feb 28, 2009</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> NYLINK INSURANCE AGENCY INCORPORATED CATHERINE A MARRION 51 MADISON AVENUE NEW YORK NY 10017		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702- USA			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	GERARD A ROCCHI	335 MADISON AVENUE SUITE 200	NEW YORK	NY	USA	10017	
DIRECTOR	GARY E WENDLANDT	51 MADISON AVENUE	NEW YORK	NY	USA	10010	
DIRECTOR	JOHN A CULLEN	51 MADISON AVENUE	NEW YORK	NY	USA	10010	
DIRECTOR	MICHAEL J SENKEN	51 MADISON AVENUE	NEW YORK	NY	USA	10010	
DIRECTOR	CHRISTOPHER O BLUNT	51 MADISON AVENUE	NEW YORK	NY	USA	10010	
DIRECTOR	GERARD A ROCCHI	51 MADISON AVENUE	NEW YORK	NY	USA	10010	
TREASURER	MICHAEL J SENKEN	51 MADISON AVENUE	NEW YORK	NY	USA	10010	
SECRETARY	CATHERINE A MARRION	51 MADISON AVENUE	NEW YORK	NY	USA	10010	
5. Organized Under the Laws of:  <b>DE C 159024</b>		6. Annual Report must be signed.* Signature: Catherine A MARION Name (type or print): Catherine A MARION  Date: 02/17/2009 Title: Secretary					
Processed 02/17/2009		* Electronically provided signatures are accepted as original signatures.					