

No. W 27874		Due no later than Jan 31, 2009		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. HELMSMAN INSURANCE AGENCY LLC CHRISTOPHER C MANSFIELD 20 RIVERSIDE RD WESTON MA 02493		CORPORATION SERVICE COMPANY 1401 SHORELINE DRIVE STE 2 BOISE ID 83702		
				3. <u>New</u> Registered Agent Signature:*		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	CHRISTOPHER C MANSFIELD	175 BERKELEY ST	BOSTON	MA	USA	02117
MANAGER	JOHN M COLLINS	175 BERKELEY ST	BOSTON	MA	USA	02117
MANAGER	DENNIS J LANGWELL	175 BERKELEY ST	BOSTON	MA	USA	02117
MANAGER	DOUGLAS M NELSON	175 BERKELEY ST	BOSTON	MA	USA	02117
MANAGER	DEBORAH L MICHEL	175 BERKELEY ST	BOSTON	MA	USA	02117
MANAGER	J. P. CONDRIN III	175 BERKELEY ST	BOSTON	MA	USA	02117
5. Organized Under the Laws of: MA W 27874		6. Annual Report must be signed.* Signature: Gina Hudson Name (type or print): Gina Hudson Date: 01/15/2009 Title: Regulatory Specialist				
Processed 01/15/2009		* Electronically provided signatures are accepted as original signatures.				