

No. W 63909	Due no later than Jun 30, 2009 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. AXA DISTRIBUTORS, LLC 1290 AVENUE OF THE AMERICAS NEW YORK NY 10104		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702- USA			
			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	JAMES A SHEPHERDSON	1290 AVENUE OF THE AMERICAS	NEW YORK	NY	USA	10104
MANAGER	PHILLIP MESERVE	1290 AVENUE OF THE AMERICAS	NEW YORK	NY	USA	10104
MANAGER	WILLIAM MILLER JR	1290 AVENUE OF THE AMERICAS	NEW YORK	NY	USA	10104
5. Organized Under the Laws of: DE W 63909	6. Annual Report must be signed.* Signature: Laura Louis Name (type or print): Laura Louis		Date: 05/08/2009 Title: Poa			
Processed 05/08/2009		* Electronically provided signatures are accepted as original signatures.				