

No. W 21365	Due no later than November 30, 2004 Annual Report Form		2. Registered Agent and Office 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 applicable CHAMBER INSURANCE AGENCY SERVICES, 70 PINE ST 30TH FL NEW YORK, NY 10270		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE, ID 83702 3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>John B. Sherlock</td> <td>1700 Market Street,</td> <td>Philadelphia,</td> <td>PA</td> <td>19103</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	Manager	John B. Sherlock	1700 Market Street,	Philadelphia,	PA	19103
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
Manager	John B. Sherlock	1700 Market Street,	Philadelphia,	PA	19103										
5. Organized Under the Laws of: DELAWARE W 21365		6. Signature <u>Elizabeth M. TLLCK</u> Date <u>10-14-04</u> Name <small>(Typed or Printed)</small> <u>Elizabeth M. TLLCK</u> Title <u>Authorized Person</u>													