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| No. W 26856 | Due no later than Nov 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. LFD INSURANCE AGENCY, LIMITED LIABILITY COMPANY CHERRY WHITAKER LFD 350 CHURCH ST MLB 1 HARTFORD CT 06103 | | 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 at least one Member or Manager. | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
| MANAGER | PATRICIA INSLEY | 130 N. RADNOR-CHESTER ROAD | RADNOR | PA | USA | 19087 |
| MEMBER | JOEL SCHWARTZ | 130 N. RADNOR-CHESTER ROAD | RADNOR | PA | USA | 19087 |
| MANAGER | WILFORD FULLER | 130 N. RADNOR-CHESTER ROAD | RADNOR | PA | USA | 19087 |
| 5. Organized Under the Laws of: DE W 26856 | 6. Annual Report must be signed.* Signature: Charito C Whitaker Name (type or print): Charito C Whitaker | | Date: 12/17/2009 Title: Avp | | | |
| Processed 12/17/2009 | | * Electronically provided signatures are accepted as original signatures. | | | | |