

No. C 173297		Due no later than May 31, 2008		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		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE ID 83702			
		1. Mailing Address: Correct in this box if needed. WELLS FARGO INSURANCE SERVICES OF NEW YORK, INC. LOIS BOLOGRA 330 MADISON AVE 7TH FLOOR NEW YORK NY 10017 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	
DIRECTOR	ROBERT GRECO	150 N MICHIGAN AVENUE SUITE 4100	CHICAGO	IL	USA	60601	
TREASURER	CHRISTINE OSTERMEIER	150 N MICHIGAN AVENUE SUITE 4100	CHICAGO	IL	USA	60601	
PRESIDENT	KEVIN KENNY	7 GIRALDA FARMS 2ND FLOOR	NEW YORK	NY	USA	10017	
SECRETARY	ROBERT M GRECO	150 N MICHIGAN AVE SIOTE 1400	CHICAGO	IL	USA	60601	
5. Organized Under the Laws of: NY C 173297		6. Annual Report must be signed.* Signature: Robert Greco Name (type or print): Robert Greco		Date: 06/25/2008 Title: Secretary			
Processed 06/25/2008		* Electronically provided signatures are accepted as original signatures.					