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A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence. RI 02904-2615

401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

Filing Period: January 1 - March 1 - Filing Fee: \$50.00* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-150).

subject to a penalty fee of \$25.00.	-1501(e), each corporation j	cailing or refusing to file its ann	nual report within thirty (30) e	days after the time prescribed by la	ıw (K.I.G.L. /-1.2-1)0	H(c&d)) is
1. Corporate ID No. 000135489	2. Name of Corporation Legg Mason Financial Services, Inc					
3. Street Address Principal Business Office 100 Light Street			City Baltimore	State MD	^{Zip} 21202	
4. Business Phone No. 5. State of Incorporation MD						
6. Brief Description of the Character Reinsurance Agency	r of Business Conducted in .	Rbode Island				
7. NAMES AND ADDRESSES	S OF THE OFFICERS	: ("X" BOX FOR ATTA		SPACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Stephen T. Marynowski			Stephen W. Enoch			
Street Address 787 7th Avenue			Street Address 700 Red Brook Blvd			
New York	State NY	<i>‰</i> 10019	City Owings Mill	State MD	^{Ζip} 21117	
Secretary Name ASST SECRETARY LISA A. HOFFMAN			Treasurer Name ASST TREASURER Keith J. Anzel			
3800 CHIGROUP Center Dr			Street Address 388 Greenwich Street			
City	State	Zip	City	State	Zip	
Lowbo	1 <i>F</i> ~	33610	New York	NY	10013	
8. NAMES AND ADDRESSES	S OF THE DIRECTOR	S: ("X" BOX FOR ATT	_	IN SPACES BEFORE USIN	IG ATTACHMENT	'S
Director Name			Director Name			
Donald Bendernagel			Clifford Verron			
Street Address			Street Address			
388 Greenwich Street			: 388 Greenwich Street			
City	State	Zip	City	State	Zip	
New York	JNY	10013	New York	NY NY	100	
Director Name Scott L Flood			None PRITI			
Street Address 388 Greenwich Street			Street Address			
City New York	State NY	<i>гір</i> 10013	City	State	Zip .	ATE ATE
9. SHARES AUTHORIZED	•	•	10. SHARES ISSUE	D ("X" BOX FOR ATTAC	HMENT) 📋	
			ISSUED SHARES — THIS S	SECTION <u>MUST</u> BE COMPLETED	>	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value	
			100	Common	0.00	
This report must be executed this report must be executed				corporation is in the hand	ls of a receiver or	trustee.

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements
FILED	contained herein are true and correct.
File Date	Signature Date
2011 FEB -9 AM 10: 32	Lisa A Hoffman
By 5 1 3435 6 52	Print or Type Name Assistant Secretary
SECRETARY OF STATE CHARGE AND SCORE TO ANALYSIS AND SCORE TO AN EXCENDED.	Title Form 630 Rev. 08/08