

State of Rhode Island and Providence Plantations Office of the Secretary of State

Division Of Business Services 148 W. River Street Providence RI 02904-2615 Fee: \$50.00

(401) 222-3040

Limited Liability Company Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2012

1. ID No. 000160337

2. Exact Name of the Limited Liability Company <u>ALLIANT INSURANCE SERVICES</u> <u>HOUSTON, LLC</u>

3. State of Formation

State: DE

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

INSURANCE AGENCY/BROKERAGE

5. Principal Office Address

No. and Street: 5847 SAN FELIPE STREET

SUITE 2750

City or Town: HOUSTON State: TX Zip: 77057 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: <u>LEGAL DEPT.</u> Contact Title: No. and Street: <u>701 B STREET</u>

6TH FLOOR

City or Town: SAN DIEGO State: CA Zip: 92101 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	THOMAS W. CORBETT	1301 DOVE STREET, SUITE 200 NEWPORT BEACH, CA 92660 USA
MANAGER	P. GREGORY ZIMMER JR.	1301 DOVE STREET, SUITE 200 NEWPORT BEACH, CA 92660 USA
MANAGER	JEROLD D. HALL	1301 DOVE STREET, SUITE 200 NEWPORT BEACH, CA 92660 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 22 Day of October, 2012 at 12:43:25 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By <u>KENNETH A, ZAK</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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