



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401 222 3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2005

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. ID No. 144282		2. Exact name of the limited liability company TWIW Insurance Services, LLC	
3. State of Formation CALIFORNIA		4. Brief description of the character of the business which is actually conducted in Rhode Island INSURANCE SERVICES	
5. Principal office address 196 S. FIR STREET		City VENTURA	State CA
		Zip 93001	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name LILLIAN OSBORN		Contact Title LICENSING COORDINATOR	
Street Address 196 SOUTH FIR STREET (P.O. BOX 1388)		City VENTURA	State CA
		Zip 93002-	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS * (X) BOX FOR ATTACHMENT * ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT. R.I.G.L. 7-16-12 (d) (2) / 7-16-52			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name	Manager Name		
Street Address	Street Address		
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name MARK B. BARDORF, ESQ.		Address 36 WASHINGTON SQUARE	
Address		City NEWPORT	Zip 02840-

This report must be signed in ink by an authorized person pursuant to 7-16-66.



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05 OCT 24 AM 9:26
SECRETARY OF STATE
CORPORATIONS DIV

144282 FLLC 10/11/05 10:43:43 AM

File Date 10/24/05

Check No 032161

By CXC

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

H. Randall Kinsling 10-19-05
Signature of Authorized Person Date
H. RANDALL KINSLING, PRESIDENT OF
H. RANDALL KINSLING, INC., MANAGING MEMBER
Print or Type Name of Authorized Person