

# Kentucky Secretary of State Annual Report

**This Annual Report was submitted electronically**

<b>Company</b>	GALLAGHER HEALTHCARE INSURANCE SERVICES OF KANSAS CITY, LLC
<b>Company ID</b>	0571398.06.99999
<b>Date Filed</b>	6/20/2008 1:20:29 PM
<b>Fee</b>	\$15.00

## **Principal Office**

1125 GRAND  
SUITE 1300  
KANSAS CITY, MO 64106

## **Registered Agent**

CORPORATION SERVICE COMPANY  
421 WEST MAIN STREET  
FRANKFORT, KY 40601

## **Members / Managers**

Manager	Christopher M Miller	1125 Grand, Suite 1300 Kansas City, MO 64106
---------	----------------------	--

## **Signatures**

<b>Signature</b>	LISA A. COYNE
<b>Title</b>	ASST V. P.