2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 20, 2006
Secretary of State

DOCUMENT# F01000004435

Entity Name: LIFE INSURANCE SETTLEMENT ASSOCIATION INC.

Current Principal Place of Business:

1504 EAST CONCORD ST.
ORLANDO, FL 328035412

New Principal Place of Business:

Current Mailing Address:

1504 EAST CONCORD ST.
ORLANDO, FL 328035412

New Mailing Address:

FEI Number: 52-1912672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEAD, DOUG
800 MAYFAIR CIRCLE
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	LOY, PHILIP	
Address:	28O HERITAGE WALK	
City-St-Zip:	WOODSTOCK, GA 30188	
Title:	V	( ) Delete
Name:	LUCENT, JOE	
Address:	814 HIGHWAY A1A, SUITE 302	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	S	( ) Delete
Name:	CASEY, BRIAN	
Address:	1170 PEACHTREE STREET, NE STE 1900	
City-St-Zip:	ATLANTA, GA 30309	
Title:	AS	( ) Delete
Name:	HEAD, DOUG	
Address:	800 MAYFAIR CIRCLE	
City-St-Zip:	ORLANDO, FL 32803	
Title:	P	( ) Delete
Name:	FREEMAN, BRYAN	
Address:	415 EAST PACES FERRY ROAD NE	
City-St-Zip:	ATLANTA, GA 30305	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	T	(X) Change ( ) Addition
Name:	POTOCZAK, WILLIAM	
Address:	27600 CHAGRIN BLVD, SUITE 200	
City-St-Zip:	CLEVELAND, OH 44122	
Title:	V	(X) Change ( ) Addition
Name:	HAYNIE, ROB	
Address:	550 WEST CYPRESS CREEK RD., SUITE 300	
City-St-Zip:	FORT LAUDERDALE, FL 33309	
Title:	S	(X) Change ( ) Addition
Name:	GUILFORD, RICHARD	
Address:	10305 BUCKWOOD LANE	
City-St-Zip:	MECHANISVILLE, VA 23116	
Title:	AS	(X) Change ( ) Addition
Name:	HEAD, DOUG	
Address:	1504 EAST CONCORD STREET	
City-St-Zip:	ORLANDO, FL 32803	
Title:	P	(X) Change ( ) Addition
Name:	RENCURRELL, RAMIRO	
Address:	1320 S. DIXIE HWY., SUITE 600	
City-St-Zip:	CORAL GABLES, FL 33146	
Title:	VP	( ) Change (X) Addition
Name:	KIRBY, SCOTT	
Address:	2101 PARK CENTER DRIVE, SUITE 220	
City-St-Zip:	ORLANDO, FL 32835	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUG HEAD AS 10/20/2006

Electronic Signature of Signing Officer or Director — Date