

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000094797

**FILED  
Apr 16, 2010  
Secretary of State**

**Entity Name:** LIFELINE SETTLEMENTS TRUST, LLC

**Current Principal Place of Business:**

934 N. UNIVERSITY DR., #302  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

934 N. UNIVERSITY DR., #302  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

**FEI Number:** 26-3525394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RABINOWITZ, ROBERT  
934 N. UNIVERSITY DR., #302  
CORAL SPRINGS, FL 33071 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: RABINOWITZ, ROBERT  
Address: 934 N. UNIVERSITY DR., #302  
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT RABINOWITZ

MGR

04/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date