2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000445

Entity Name: METLIFE ASSOCIATES LLC

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

ONE METLIFE PLAZA 27-01 QUEENS PLAZA NORTH LONG ISLAND CITY, NY 11101

1095 AVENUE OF THE AMERICAS NEW YORK, NY 10036

Current Mailing Address:

ONE METLIFE PLAZA 27-01 QUEENS PLAZA NORTH LONG ISLAND CITY, NY 11101

New Mailing Address:

1095 AVENUE OF THE AMERICAS TAX DEPARTMENT - 15TH FLOOR NEW YORK, NY 10036 US

FEI Number: 13-2862391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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

ADDITIONS/CHANGES:

City-St-Zip:

Address:

Address:

Address:

City-St-Zip:

City-St-Zip:

City-St-Zip:

() Delete FARRELL, MICHAEL K Name: 400 ATRIUM DRIVE Address:

MANAGING MEMBERS/MANAGERS:

City-St-Zip: SOMERSET, NJ 08873

Title: () Delete HOGAN, THOMAS G JR Name: Address: 400 ATRIUM DRIVE

City-St-Zip: SOMERSET, NJ 08873 Title: () Delete

KOEGER, JAMES W Name: Address: 13045 TESSON FERRY RD City-St-Zip: SAINT LOUIS, MO 63128

Title: () Delete

Name: JORDAN, DANIEL D 501 BOYLSTON ST Address: City-St-Zip: BOSTON, MA 02116

Title: () Delete BROWN, LEO R Name:

1 METLIFE PLAZA 27-01 QUEENS PL.N. Address: City-St-Zip: LONG ISLAND CITY, NY 11101

Title: (X) Delete

ZDEB, JOSEPH A Name: Address: 1 METLIFE PLAZA 27-01 QUEENS PL.N. LONG ISLAND CITY, NY 11101 City-St-Zip:

Title: (X) Change () Addition FARRELL, MICHAEL K Name:

Address: 10 PARK AVENUE City-St-Zip: MORRISTOWN, NJ 07962

Title: () Change () Addition Name: Address:

Title: () Change () Addition Name:

Title: () Change () Addition Name:

Title: (X) Change () Addition

ZDEB, JOSEPH A Name:

1095 AVENUE OF THE AMERICAS Address: City-St-Zip: NEW YORK, NY 10036 US

Title: () Change () Addition

Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JOSEPH A. ZDEB 03/19/2009