2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#850796

FILED Feb 20, 2009 Secretary of State

Entity Name: METLIFE INVESTORS INSURANCE COMPANY

urrent Principal Place of Business:		New Principal Place of Business:	
PARK P UITE 190 VINE, C			
urrent N	/lailing Address:	New Mailing Address:	
PARK P JITE 190 VINE, C			
l Number	r: 43-1236042 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
ame and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:	
200 SOL	PORATION SYSTEM ITH PINE ISLAND RD ION, FL 33324 US		
	e named entity submits this statement for the of Florida.	e purpose of changing its registered office or registered agent, or bo	
GNATU			
	Electronic Signature of Registered A	Agent Date	
ction Ca	mpaign Financing Trust Fund Contribution ().		
FICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
le: me: dress: :y-St-Zip:	VDS () Delete PEARSON, RICHARD C 5 PK PLAZA, STE 1900 IRVINE, CA 92614	Title: () Change () Addition Name: Address: City-St-Zip:	
e: me: dress: y-St-Zip:	DPC () Delete FARRELL, MICHAEL K 5 PK PLAZA STE 1900 IRVINE, CA 92614	Title: DPC (X) Change () Addition Name: FARRELL, MICHAEL K Address: 10 PARK AVENUE City-St-Zip: MORRISTOWN, NJ 07962	
e:	D () Delete KADUSON, JAY S 10 PARK AVENUE	Title: () Change () Addition Name: Address:	
dress:	MORRISTOWN, NJ 07962	City-St-Zip:	
me: dress: y-St-Zip: le: me: dress: y-St-Zip:	MORRISTOWN, NJ 07962 D () Delete SYLVESTER, PAUL A 10 PARK AVENUE MORRISTOWN, NJ 07962	City-St-∠ip: Title: () Change () Addition Name: Address: City-St-Zip:	
dress: y-St-Zip: le: me: dress:	D () Delete SYLVESTER, PAUL A 10 PARK AVENUE	Title: () Change () Addition Name: Address:	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD C. PEARSON VDS 02/20/2009