## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000000282

City-St-Zip:

ORLANDO, FL 32836

Entity Name: 1ST LIFE FINANCIAL, LLC

FILED Jul 11, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 7680 UNIVERSAL BLVD STE 680 ORLANDO, FL 32819 **Current Mailing Address: New Mailing Address:** 7680 UNIVERSAL BLVD STE 680 ORLANDO, FL 32819 FEI Number: 54-2089199 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COLE, WILLIAM 7680 ÚNIVERSAL BLVD STE 680 ORLANDO, FL 32819 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete COLE, WILLIAM Name: Name: Address: 12927 ENTRADA DRIVE Address: City-St-Zip: ORLANDO, FL 32837 City-St-Zip: Title: MGRM Title: ( ) Delete () Change () Addition Name: SUMNER, JAY Name: Address: 6218 ANDEROZZI Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MCGONNELL, MICHAEL S Name: Name: Address: 10611 STANTON COURT Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: MICHAEL S MCGONNELL MGRM 07/11/2005