

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000282

Entity Name: 1ST LIFE FINANCIAL, LLC

FILED
Feb 27, 2007
Secretary of State

Current Principal Place of Business:

7680 UNIVERSAL BLVD STE 680
ORLANDO, FL 32819

New Principal Place of Business:

4970 LAZY OAKS WAY
SAINT CLOUD, FL 34771

Current Mailing Address:

7680 UNIVERSAL BLVD STE 680
ORLANDO, FL 32819

New Mailing Address:

4970 LAZY OAKS WAY
SAINT CLOUD, FL 34771

FEI Number: 54-2089199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, WILLIAM
7680 UNIVERSAL BLVD STE 680
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

COLE, WILLIAM
4970 LAZY OAKS WAY
SAINT CLOUD, FL 34771 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: WILLIAM E. COLE

02/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLE, WILLIAM E
Address: 4970 LAZY OAKS WAY
City-St-Zip: ST. CLOUD, FL 34771

Title: MGRM (X) Delete
Name: SUMNER, JAY B
Address: 6218 ANDEROSZI
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: WILLIAM E. COLE

MGRM

02/27/2007

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