

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000062376

Entity Name: PEOPLE'S TRUST MGA, LLC

FILED
Apr 10, 2012
Secretary of State

Current Principal Place of Business:

6001 BROKEN SOUND PARKWAY
SUITE 200
BOCA RATON, FL 33487

New Principal Place of Business:

6001 BROKEN SOUND PARKWAY NW
SUITE 200
BOCA RATON, FL 33487 US

Current Mailing Address:

6001 BROKEN SOUND PARKWAY
SUITE 200
BOCA RATON, FL 33487

New Mailing Address:

6001 BROKEN SOUND PARKWAY NW
SUITE 200
BOCA RATON, FL 33487 US

FEI Number: 35-2314592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRANKEL, BRETT R MR.
6001 BROKEN SOUND PARKWAY
SUITE 200
BOCA RATON, FL 33487 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: GOLD, MICHAEL
Address: 6001 BROKEN SOUND PARKWAY NW, SUITE 200
City-St-Zip: BOCA RATON, FL 33487

Title: MGR
Name: SCHAEFFER, GEORGE
Address: 6001 BROKEN SOUND PARKWAY NW, SUITE 200
City-St-Zip: BOCA RATON, FL 33487

Title: CFO
Name: ROHDE, STEPHEN
Address: 6001 BROKEN SOUND PARKWAY NW, SUITE 200
City-St-Zip: BOCA RATON, FL 33487

Title: PRES
Name: POLITZER, MITCHELL F
Address: 6001 BROKEN SOUND PARKWAY, SUITE 200
City-St-Zip: BOCA RATON, FL 33487

Title: VP
Name: BOWSHER, MARK
Address: 6001 BROKEN SOUND PARKWAY NW, SUITE 200
City-St-Zip: BOCA RATON, FL 33487 US

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: MICHAEL GOLD

MGR

04/10/2012

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