

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000071687

Entity Name: INSURALIFE GROUP LLC

FILED  
Apr 29, 2010  
Secretary of State

## Current Principal Place of Business:

1955 E EDGEWOOD DR  
SUITE 101  
LAKELAND, FL 33803 US

## New Principal Place of Business:

## Current Mailing Address:

1955 E EDGEWOOD DR  
SUITE 101  
LAKELAND, FL 33803 US

## New Mailing Address:

FEI Number: 80-0225296

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLE, STEPHEN O  
625 COURT ST  
CLEARWATER, FL 33756 US

## Name and Address of New Registered Agent:

BLACKBURN, DENNIS L  
5150 BELFORT RD S., BLDG 500  
JACKSONVILLE, FL 32256 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: DENNIS L. BLACKBURN

04/29/2010

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: HOLMES, PAUL  
Address: 2000 REGENCY PARKWAY  
City-St-Zip: CARY, NC 27518 US

Title: MGRM  
Name: WELLS, MARK  
Address: 1955 E EDGEWOOD DR SUITE 101  
City-St-Zip: LAKELAND, FL 33803 US

Title: MGRM  
Name: CRAFT, JOHN  
Address: 2209 SAWGRASS VILLAGE DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: MGRM  
Name: STRATTON, JERRY  
Address: 1424 N BROWN ROAD STE 200  
City-St-Zip: LAWRENCEVILLE, GA 30043 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: MARK R. WELLS

PRES

04/29/2010

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