

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109671

FILED
Sep 08, 2009
Secretary of State

Entity Name: MORAN LIFE INSURANCE, LLC

Current Principal Place of Business:

183 LANDRUM LANE
SUITE 103
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

183 LANDRUM LANE
SUITE 103
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 80-0308161 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

MORAN, MORGAN Q
183 LANDRUM LANE
SUITE 103
PONTE VEDRA BEACH, FL 32082 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:

Title: MGR () Delete
Name: K & M INSURANCE AGENCY, LLC
Address: 10616 BRIGHTON HILL CIR SOUTH
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR () Delete
Name: BAGNI, VINCE
Address: 183 LANDRUM LANE SUITE 103
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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 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: MORGAN Q MORAN

MGR

09/08/2009

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