

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000694

FILED
Apr 22, 2009
Secretary of State

Entity Name: ING INVESTMENT ADVISORS, LLC

Current Principal Place of Business:

ONE HERITAGE WAY
NORTH QUINCY, MA 02171

New Principal Place of Business:

ONE ORANGE WAY
WINDSOR, CT 06095

Current Mailing Address:

ONE HERITAGE WAY
NORTH QUINCY, MA 02171

New Mailing Address:

20 WASHINGTON AVENUE SOUTH
ROUTE 1226
MINNEAPOLIS, MN 55401

FEI Number: 22-1862786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 () Delete
Name: MARTIN, RAYMOND
Address: 400 ATRIUM DRIVE
City-St-Zip: SOMERSET, NJ 08873

Title: MGR () Delete
Name: DOTO, MICHAEL
Address: 400 ATRIUM DRIVE
City-St-Zip: SOMERSET, NJ 08873

Title: MGR () Delete
Name: SHUCKEROW, NIKE
Address: ONE HERITAGE DR
City-St-Zip: QUINCY, MA 02171

Title: MGR (X) Delete
Name: JENKINS, GARY
Address: 400 ATRIUM DRIVE
City-St-Zip: SOMERSET, NJ 08873

Title: MGR (X) Delete
Name: FAMULARO, JAMES
Address: 400 ATRIUM DRIVE
City-St-Zip: SOMERSET, NJ 08873

Title: MGR (X) Delete
Name: WILLIAMS, KELLY
Address: ONE HERITAGE DR
City-St-Zip: QUINCY, MA 02171

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MARTIN, RAYMOND
Address: ONE HERITAGE DRIVE
City-St-Zip: N. QUINCY, MA 02171

Title: MGR (X) Change () Addition
Name: GARY, JENKINS
Address: 230 PARK AVENUE
City-St-Zip: NEW YORK, NY 10169

Title: MGR (X) Change () Addition
Name: PRICE, RANDALL K
Address: 20 WASHINGTON AVENUE SOUTH
City-St-Zip: MINNEAPOLIS, MN 55401

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

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: RANDALL K. PRICE

MGR

04/22/2009

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