

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000005731

FILED
Apr 06, 2010
Secretary of State

Entity Name: ANN ARBOR ANNUITY EXCHANGE, LLC

Current Principal Place of Business:

45 RESEARCH DR., STE D
ANN ARBOR, MI 48105

New Principal Place of Business:

Current Mailing Address:

45 RESEARCH DR., STE D
ANN ARBOR, MI 48105

New Mailing Address:

FEI Number: 20-5539778

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
Name: LUMBARD,, VAN MGR
Address: 45 RESEARCH DR., STE D
City-St-Zip: ANN ARBOR, MI 48105

Title: MGR
Name: PETERSON,, BRIAN B MGR
Address: 45 RESEARCH DR., STE D
City-St-Zip: ANN ARBOR, MI 48105

Title: MGR
Name: THOMAS,, ANTHONY G MGR
Address: 45 RESEARCH DRIVE SUITE D
City-St-Zip: ANN ARBOR, MI 48105

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: LAURA LOUIS

POA

04/06/2010

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