

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002338

Entity Name: ANNUITYWORKS, LLC

FILED
Jan 16, 2008
Secretary of State

Current Principal Place of Business:

6900 COLLEGE BLVD., #565
OVERLAND PARK, KS 66211

New Principal Place of Business:

Current Mailing Address:

6900 COLLEGE BLVD., #565
OVERLAND PARK, KS 66211

New Mailing Address:

FEI Number: 51-0617193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: MGRM () Delete
Name: EDWARDS, ROBERT F
Address: 6900 COLLEGE BLVD., #565
City-St-Zip: OVERLAND PARK, KS 66211

Title: MGRM () Delete
Name: COLEMAN, MATTHEW R
Address: 6900 COLLEGE BLVD., #565
City-St-Zip: OVERLAND PARK, KS 66211

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: ROBERT F EDWARDS

MGRM

01/16/2008

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