

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000004709

FILED  
Apr 27, 2010  
Secretary of State

Entity Name: MMLISI FINANCIAL ALLIANCES, LLC

**Current Principal Place of Business:**

1295 STATE STREET  
SPRINGFIELD, MA 011110001

**New Principal Place of Business:**

**Current Mailing Address:**

1295 STATE STREET  
SPRINGFIELD, MA 011110001

**New Mailing Address:**

FEI Number: 41-2011634

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**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: MGRM  
Name: MML INVESTORS SERVICES, INC.  
Address: 1295 STATE STREET  
City-St-Zip: SPRINGFIELD, MA 011110001

Title: MGR  
Name: SADJAK, JEFFREY M PRES.  
Address: 1295 STATE STREET  
City-St-Zip: SPRINGFIELD, MA 011110001

Title: MGR  
Name: ROSENTHAL, ROBERT VP  
Address: 1295 STATE STATE STREET  
City-St-Zip: SPRINGFIELD, MA 01111 US

Title: MGR  
Name: MCCAULEY, WILLIAM TREA  
Address: 1295 STATE STREET  
City-St-Zip: SPRINGFIELD, MA 01111 US

Title: MGR  
Name: ROSENTHAL, ROBERT SEC.  
Address: 1295 STATE STREET  
City-St-Zip: SPRINGFIELD, MA 01111 US

Title: MGR  
Name: PERLMAN, DIANA CCO  
Address: 1295 STATE STREET  
City-St-Zip: SPRINGFIELD, MA 01111 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: JEFFREY M. SAJDAK

MGR

04/27/2010

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