2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000005484

Entity Name: TRANSAMERICA LIFE SOLUTIONS, LLC

FILED Feb 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15800 JOHN J DELANEY DRIVE SUITE 450 15800 JOHN J DELANEY DRIVE SUITE 450

CHARLOTTE, NC 28277 US

Current Mailing Address: New Mailing Address:

15800 JOHN J DELANEY DRIVE SUITE 450 15800 JOHN J DELANEY DRIVE CHARLOTTE, NC 28277 SUITE 450

CHARLOTTE, NC 28277 US

FEI Number: 26-1697163 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

MANAGING MEMBERS/MANAGERS:

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

Electronic eignature of Registered Agent

ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: DUFF, III, JAMES A Name: DUFF, III, JAMES A

Address: 15800 JOHN J DELANEY DRIVE SUITE 450
Address: 15800 JOHN J DELANEY DRIVE SUITE 450

City-St-Zip: CHARLOTTE, NC 28277 City-St-Zip: CHARLOTTE, NC 28277 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: HUNTER, JOHN R Name: HUNTER, JOHN R

 Name:
 HUNTER, JOHN R
 Name:
 HUNTER, JOHN R

 Address:
 4333 EDGEWOOD RD NE
 Address:
 4333 EDGEWOOD RD NE

 City-St-Zip:
 CEDAR RAPIDS, IA 52499
 City-St-Zip:
 CEDAR RAPIDS, IA 52499 US

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 KILBANE, KENNETH
 Name:
 KILBANE, KENNETH

 Address:
 1150 SOUTH OLIVE STREET
 Address:
 1150 SOUTH OLIVE STREET

 City-St-Zip:
 LOS ANGELES, CA 90015
 City-St-Zip:
 LOS ANGELES, CA 90015 US

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: JAMES A. DUFF, III MGR 02/26/2009