2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# M99000001685

Entity Name: LIBERTY LIFE SECURITIES LLC

Current Principal Place of Business:

100 LIBERTY WAY
DOVER, NH 03820 US

New Principal Place of Business:

Current Mailing Address:

100 LIBERTY WAY
DOVER, NH 03820 US

New Mailing Address:

175 BERKELEY ST
BOSTON, MA 02117 US

FEI Number: 02-0507965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DILLON, MARGARET
Address: 175 BERKELEY ST.
City-St-Zip: BOSTON, MA 02117

Title: MGR ( ) Delete
Name: CONDRIN, J. P III
Address: 175 BERKELEY ST.
City-St-Zip: BOSTON, MA 02117

Title: MGR (X) Delete
Name: SENTLER, STEVEN M
Address: 175 BERKELEY ST.
City-St-Zip: BOSTON, MA 02117

Title: MGR (X) Delete
Name: O'CONNELL, WILLIAM J
Address: 175 BERKELEY ST.
City-St-Zip: BOSTON, MA 02117

Title: MGR (X) Delete
Name: TREECE, JOHN J
Address: 100 LIBERTY WAY
City-St-Zip: DOVER, NH 03820

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: NEAL, CHERYL K
Address: 175 BERKELEY ST.
City-St-Zip: BOSTON, MA 02117

Title: MGR (X) Change ( ) Addition
Name: SWEENEY, TIMOTHY M
Address: 175 BERKELEY ST.
City-St-Zip: BOSTON, MA 02117

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: CHERYL K. NEAL MAN 04/27/2009

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