2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000011853

Entity Name: ESTATE LIFE INSURANCE AGENCY, INC.

FILED Aug 03, 2007 Secretary of State

-		,			
Current Principal Place of Business:			New Principal Place of Business:		
POST OFFICE BOX 30968 PALM BEACH GARDENS, FL 33420			8512 EGRET MEADOW LANE WEST PALM BEACH, FL 33412		
Current Mailing Address:			New Mailing Address:		
	FICE BOX 30968 ACH GARDENS, FL 3:	3420			
FEI Number: F		mber Applied For (X)	FEI Number Not Applicable ()		Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
11380 PROPALM BEA)AD #221E 3410 US	ourpose of changing i	ts registered	d office or registered agent, or both,
	e of Florida.				
SIGNATU		ture of Registered Ag	ent		Date
Election Ca	ce with s. 607.193(2)(b), F mpaign Financing Trust Fi S AND DIRECTORS:		·		S TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:		-	Title: Name: Address: City-St-Zip:		()Change ()Addition
Title: Name: Address:	() Delete		Title: Name: Address:	STACE, KEL POST OFFIC	() Change (X) Addition LY S DE BOX 30968

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BY C.P.DEMAIO, ATTORNEY-IN-FACT D 08/03/2007