



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2013

1. ID No. 000542607

2. Exact Name of the Limited Liability Company PEACHTREE LIFE SETTLEMENTS, LLC

3. State of Formation

State: NV

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

LIFE SETTLEMENT PROVIDER

5. Principal Office Address

No. and Street: 201 KING OF PRUSSIA ROAD

City or Town: RADNOR

State: PA Zip: 19087 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: RICHARD CONNELLY Contact Title: GENERAL COUNSEL

No. and Street: 201 KING OF PRUSSIA ROAD

SUITE 200

City or Town: RADNOR

State: PA Zip: 19087 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	DAVID MILLER	201 KING OF PRUSSIA RD RADNOR, PA 19087 USA
MANAGER	RANDI SELLARI	201 KING OF PRUSSIA ROAD RADNOR, PA 19087 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 26 Day of August, 2013 at 11:32:41 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By RANDI SELLARI
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2013 State of Rhode Island and Providence Plantations
All Rights Reserved