

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **809834 (5)**

1. Corporation Name  
**THE UNION LABOR LIFE INSURANCE COMPANY**



Principal Place of Business: 111 MASSACHUSETTS AVE.. NW WASHINGTON DC 20001  
Mailing Address: 111 MASSACHUSETTS AVE.. NW WASHINGTON DC 20001

3. Date Incorporated or Qualified: **05/24/1954**  
3a. Date of Last Report: **01/27/1995**

2. Principal Place of Business (21) Suite, Apt. #, etc (22) City & State (23) Zip (24) Country (25)  
2a. Mailing Address (26) Suite, Apt. #, etc (27) City & State (28) Zip (29) Country (30)

4. FEI Number: **13-1423090**  
Applied For:  Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE INSURANCE COMMISSIONER  
THE CAPITOL BLDG.  
TALLAHASSEE FL 32304

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registrant and the filer, if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <b>CD</b>	NAME: <b>GEORGINE, ROBERT, A</b>	1.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>111 MASSACHUSETTS AVE NW</b>	CITY-ST-ZIP: <b>WASHINGTON DC</b>	1.2 NAME:	
TITLE: <b>STD</b>	NAME: <b>NUL, LESTER, H, SR</b>	1.3 STREET ADDRESS:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>111 MASSACHUSETTS AVE NW</b>	CITY-ST-ZIP: <b>WASHINGTON DC</b>	1.4 CITY-ST-ZIP:	
TITLE: <b>EV</b>	NAME: <b>LUCE, JAMES, W</b>	2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>111 MASSACHUSETTS AVE NW</b>	CITY-ST-ZIP: <b>WASHINGTON DC</b>	2.2 NAME:	
TITLE: <b>GCD</b>	NAME: <b>MCNULTY, JAMES, F, M</b>	2.3 STREET ADDRESS:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>111 MASSACHUSETTS AVE NW</b>	CITY-ST-ZIP: <b>WASHINGTON DC</b>	2.4 CITY-ST-ZIP:	
TITLE: <b>SV</b>	NAME: <b>CROSS, WILLIAM, L</b>	3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>111 MASSACHUSETTS AVE NW</b>	CITY-ST-ZIP: <b>WASHINGTON DC</b>	3.2 NAME:	
TITLE: <b>VS</b>	NAME: <b>CARABILLO, JOSEPH, A</b>	3.3 STREET ADDRESS:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>111 MASSACHUSETTS AVE NW</b>	CITY-ST-ZIP: <b>WASHINGTON DC</b>	3.4 CITY-ST-ZIP:	
TITLE: <b>VS</b>	NAME: <b>CARABILLO, JOSEPH, A</b>	4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>111 MASSACHUSETTS AVE NW</b>	CITY-ST-ZIP: <b>WASHINGTON DC</b>	4.2 NAME:	
TITLE: <b>VS</b>	NAME: <b>CARABILLO, JOSEPH, A</b>	4.3 STREET ADDRESS:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>111 MASSACHUSETTS AVE NW</b>	CITY-ST-ZIP: <b>WASHINGTON DC</b>	4.4 CITY-ST-ZIP:	
TITLE: <b>VS</b>	NAME: <b>CARABILLO, JOSEPH, A</b>	5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jan W. Juel*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: \_\_\_\_\_ Daytime Phone #: **(202) 682-0900**

CR2E034 (12/95)

**The Union Labor Life Insurance Company**

**OFFICERS LIST**

<b><u>TITLE</u></b>	<b><u>NAME</u></b>	<b><u>OFFICE ADDRESS</u></b>
Chairman & CEO	Robert A. Georgine	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
President	John F. Gentleman	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Secretary-Treasurer	Lester H. Null, Sr.	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Executive Vice President, Chief Operating Officer	James W. Luce	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Senior Vice President, Insurance Operations	Charles R. Sormani	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Senior Vice President, Investments	Michael R. Steed	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President-Chief Legal Officer & Assistant Secretary	Joseph A. Carabillo	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President, Actuary	Thomas B. Bowling	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President, Investments	Herbert C. Canapary	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President, National Sales Manager	Mark. A. Maloney	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President, Controller	Daniel P. Spencer	111 Massachusetts Avenue, N.W. Washington, D.C. 20001

**The Union Labor Life Insurance Company**

**DIRECTORS LIST**

<b><u>NAME</u></b>	<b><u>OFFICE ADDRESS</u></b>
Robert A. Georgine	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
John F. Gentleman	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Lester H. Null, Sr.	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
John. J. Barry	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Frank W. Carter	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
John T. Joyce	111 Massachusetts Avenue, N.W. Washington, D.C. 20001