

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

*** CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 20 AM 8:40

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 812200 (4)

1. Corporation Name

LIFE INSURANCE COMPANY OF NORTH AMERICA

Principal Place of Business

**% HARRY E HOYT
1801 CHESTNUT ST., TWO LIBERTY PLACE
PHILADELPHIA PA 19132**

Mailing Address

**% HARRY E HOYT
1801 CHESTNUT ST., TWO LIBERTY PLACE
PHILADELPHIA PA 19132**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/12/1957

3a. Date of Last Report

04/29/1994

4. FEI Number

23-1503749

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. 193.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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 registered agent and title if applicable

NOTE: Registered Agent Signature Required when Resigning

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**VD
ABRAHAM, LYNN E.
1801 CHESTNUT ST
PHILADELPHIA PA**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP
19192
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**V
BOKUN, JUDITH E.
1801 CHESTNUT ST
PHILADELPHIA PA**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP
**DN
Brownmiller, Richard A.
1601 CHESTNUT STREET
PHILA. PA. 19192**
☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**VD
PREMINGER, MARC L
1801 CHESTNUT ST
PHILADELPHIA PA**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP
19192
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**S
HESSING, ILANA G
1801 CHESTNUT ST
PHILADELPHIA PA 19192**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**PCD
LEONARD, JOHN K
1801 CHESTNUT ST
PHILADELPHIA PA 19192**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**V
POULSON, WILLIAM C.
1801 CHESTNUT ST
PHILADELPHIA PA**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP
**V
Donatone Steven T
1601 CHESTNUT STREET
PHILA PA. 19192**
☒ Change ☒ Addition

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:

Ilana G. Hessing
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ILANA G. HESSING

4/13/95

(215) 761-1973

Date

Telephone #

LIFE INSURANCE COMPANY OF NORTH AMERICA (257)

8/22/00

ADDRESS:

**TWO LIBERTY PLACE - 1601 CHESTNUT STREET
PHILADELPHIA
PENNSYLVANIA 19192**

TELEPHONE:

(215) 761-1000

OWNERSHIP: CONNECTICUT GENERAL CORPORATION - 100%

DIRECTORS

**LYNN E ABRAHAM
HAROLD W ALBERT**

MEMBER OF INVESTMENT COMMITTEE

**RICHARD A BROWNMILLER
ROBERT W BURGESS**

MEMBER OF INVESTMENT COMMITTEE

**STEVEN T DONATONE
JANET L DUCHAINE
JOHN K LEONARD**

CHAIRMAN OF EXECUTIVE COMMITTEE

**KATHLEEN A. MC ENDY
MARC L PREMINGER**

MEMBER OF EXECUTIVE COMMITTEE

ARTHUR C. REEDS, III

MEMBER OF INVESTMENT COMMITTEE

ERIC M REISENWITZ

MEMBER OF EXECUTIVE COMMITTEE

**ERIC O SCHEFFLER
MARGARET B. SPYERS-DURAN**

BENJAMIN A TOMB, JR.

OFFICERS

JOHN K LEONARD

**CHAIRMAN OF THE BOARD
PRESIDENT**

**LYNN E ABRAHAM
RICHARD A BROWNMILLER
STEVEN T DONATONE**

**SENIOR VICE PRESIDENT
SENIOR VICE PRESIDENT
SENIOR VICE PRESIDENT**

AS OF: 10/14/94

LIFE INSURANCE COMPANY OF NORTH AMERICA (257)

812200

JANET L. DUCHAINE
JOSEPH M. FITZGERALD
KATHLEEN A. MC EMDY
MARC L. PREMINGER

ERIC M. REISENWITZ
JEROLD H. ROSENBLUM

BENJAMIN A. TOMB, JR.
BARRY L. ADAMS

R. BRUCE ALBRO

PAUL BERGSTEINSSON

MARCY F. BLENDER

WARREN M. COHEN
GEORGE E. HARTZ, III
GAIL B. MARCUS

FRANCINE M. NEWMAN
MARGARET B. SPYERS-DURAN
JOANN L. DE BLASIS
ROBERT A. HALE
RENEE HALL
LEER LAMBERT
ROBERT MOOSE
FREDERICK J. NELSON
DONNA M. PETERSON
DONALD W. PORTER
CARL H. ROSENBUSH, JR.
DOREEN M. SCHLICHT
WILLIAM S. SILVANIC
SHIRLEY TAAFFE
ILANA G. HESSING
ANDREW G. HELMING
MARJORIE R. BEAULIEU
DAVID C. KOPP
GEORGE D. MULLIGAN
GERALDINE J. O'COIN

SENIOR VICE PRESIDENT
SENIOR VICE PRESIDENT
SENIOR VICE PRESIDENT
SENIOR VICE PRESIDENT
CHIEF FINANCIAL OFFICER
ACTUARY
SENIOR VICE PRESIDENT
SENIOR VICE PRESIDENT
CHIEF COUNSEL
ASSISTANT SECRETARY
SENIOR VICE PRESIDENT
VICE PRESIDENT
ASSISTANT TREASURER
VICE PRESIDENT
INVESTMENT OFFICER
VICE PRESIDENT
TREASURER
VICE PRESIDENT
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ASSISTANT VICE PRESIDENT
CORPORATE SECRETARY
SECRETARY
ASSISTANT DIRECTOR
ASSISTANT CORPORATE SECRETARY
ASSISTANT CORPORATE SECRETARY
ASSISTANT CORPORATE SECRETARY

AS OF: 10/14/94

LIFE INSURANCE COMPANY OF NORTH AMERICA (257)

812200

BARBARA HARNES
RICHARD F. EITLER, JR.
DAVID A CARLSON
HOWARD R. LOOS
DAVID M PORCELLO
BARBARA SEXTON
CHRISTINA L VAVOUDIS
DAVID B GARST
PETER J STEINMETZ
BRIAN W VILLALOBOS
AXEL A VON BORSIG

ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT TREASURER
ASSISTANT TREASURER
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