

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 812810

FILED  
Apr 29, 2012  
Secretary of State

**Entity Name:** LINCOLN LIFE & ANNUITY COMPANY OF NEW YORK

**Current Principal Place of Business:**

100 MADISON STREET  
SUITE 1860  
SYRACUSE, NY 13202

**New Principal Place of Business:**

**Current Mailing Address:**

100 MADISON STREET  
SUITE 1860  
SYRACUSE, NY 13202

**New Mailing Address:**

**FEI Number:** 22-0832760

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 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

**OFFICERS AND DIRECTORS:**

Title: VS  
Name: SHEPPARD, ROBERT O  
Address: 100 MADISON STREET, SUITE 1860  
City-St-Zip: SYRACUSE, NY 13202

Title: VCFD  
Name: FREITAG, RANDAL J  
Address: 150 N RADNOR CHESTER ROAD  
City-St-Zip: RADNOR, PA 19087

Title: PD  
Name: GLASS, DENNIS R  
Address: 150 N RADNOR CHESTER ROAD  
City-St-Zip: RADNOR, PA 19087

Title: T  
Name: COUTTS, JEFFREY D  
Address: 150 N RADNOR CHESTER ROAD  
City-St-Zip: RADNOR, PA 19087

Title: VD  
Name: CORNELIO, CHARLES C  
Address: 100 NORTH GRERENE ST  
City-St-Zip: GREENSBORO, NC 27401

I hereby 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 all other like empowered.

SIGNATURE: ROBERT O SHEPPARD

VS

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date