

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Mar 23 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 814902 (3)**  
 1. Corporation Name  
**ZURICH LIFE INSURANCE COMPANY OF AMERICA**



Principal Place of Business <b>1 KEMPER DRIVE STE T-1                  12TH FLOOR                  LONG GROVE IL 60049                  US</b>	Mailing Address <b>1400 AMERICAN LANE                  12TH FLOOR                  SCHAUMBURG IL 60173-4987                  US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 1 KEMPER DRIVE</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23 LONG GROVE IL</b> Zip <b>24 60049-0001</b>		2a. Mailing Address <b>26 1 KEMPER DRIVE, T-1</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28 LONG GROVE IL</b> Zip <b>29 60049-0001</b>		3. Date Incorporated or Qualified <b>12/02/1960</b>	
4. FEI Number <b>36-6071398</b>		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent  
**STATE INSURANCE COMMISSIONER  
 CAPITOL BLDG.  
 STATE OF FLORIDA  
 TALLAHASSEE FL 32304**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>SCOTT, JOHN B</b>	
STREET ADDRESS	<b>1 KEMPER DRIVE STE T-1</b>	
CITY-ST-ZIP	<b>LONG GROVE IL 01</b>	
TITLE	<b>SV</b>	<input type="checkbox"/> DELETE
NAME	<b>BLACKMON, FREDERICK L</b>	
STREET ADDRESS	<b>1 KEMPER DRIVE T-1</b>	
CITY-ST-ZIP	<b>LONG GROVE IL 01</b>	
TITLE	<b>SV</b>	<input type="checkbox"/> DELETE
NAME	<b>REZABEK, DEBRA P</b>	
STREET ADDRESS	<b>1 KEMPER DRIVE T1</b>	
CITY-ST-ZIP	<b>LONG GROVE IL 01</b>	
TITLE	<b>T</b>	<input type="checkbox"/> DELETE
NAME	<b>DANIEL, ROBERT A</b>	
STREET ADDRESS	<b>1 KEMPER DRIVE T-1</b>	
CITY-ST-ZIP	<b>LONG GROVE FL 01</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	<b>60049-0001</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	<b>60049-0001</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	<b>60049-0001</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	<b>60049-0001</b>
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 I have had, or on an attachment with an address.

SIGNATURE **ROBERT A. DANIEL** 2/23/98 847-550-7305

CR2E034 (10/97)

ZLICA Officers and Directors

Title	Name	Street	City	State	Zip Code	SS #
President & CEO & Director	John Burt Scott	523 South Beverly	Arlington Heights	IL	60005	367-44-7365
Secretary, Gen Counsel & Sr. V.P	Debra Phipps Rezabek	925 Pine Tree Lane	Winnetka	IL	60093	347-52-0979
Treasurer & Controller	Robert Albert Daniel	1523 Idaho Place	Elk Grove Village	IL	60007	311-76-8648
Exec. V. P. Service	Eliane Claudine Fye	303 Willow Parkway	Buffalo Grove	IL	60089	314-52-7050
Sr. V. P. & Chief Financial Officer	Frederick Lee Blackmon	190 Linden Place	Highland Park	IL	60035	386-54-6657
Sr. V. P. & Chief Actuary	James Edward Hohmann	1 Newbury Court	Hawthorn Woods	IL	60047	348-52-6192
Sr. Vice President	James Charles Harkensee	4124 North Harvard	Arlington Heights	IL	60004	350-58-6827
Sr. Vice President	George Vaisavlevich	21 Wyrndstone Way	North Barrington	IL	60010	359-34-0633
Sr. Vice President	Phillip Duane Meserve	12509 King Street	Overland Park	KS	66213	510-56-9339
Sr. Vice President	Kenneth Martin Sapp	1154 Windbrook Drive	Buffalo Grove	IL	60089	465-70-2864
Sr. V. P. & Corp. Develop. Officer	Edward King Loughridge	221 Timber Ridge	Lake Barrington	IL	60010	295-56-4528
Chief Investment Officer	Gary W. Fridley	1303 Edgewood Lane	Northbrook	IL	60062	329-32-8986
Chief Underwriter & Service Officer	Lynn Eric Patterson	5607 Winding Road	Crystal Lake	IL	60014	372-48-3031
Chief Service Officer	Barbara Scandrett Sacks	4730 Amber Circle	Hoffman Estates	IL	60195	55-62-4009
Director & Chairman of the Board	William Howard Bolinder	389 White Oak Lane	Barrington	IL	60010	027-32-9915
Director	David Alan Bowers	1338 Sunview Lane	Winnetka	IL	60093	281-42-1054
Director	Markus Rohrbasser	Lutschward, 6314 Untera	Switzerland			570-41-2070
Director	Loren Jay Alter	1370 Westmoor Trail	Winnetka	IL	60093	327-28-9833
Director	Daniel Louis Doctoroff	309 W 91st Street	New York	NY	10024	385-58-8875
Director	Paul Hendrick Warren	40 B E 98th Street	New York	NY	10128	110-70-5862