

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 820368

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** LIBERTY LIFE ASSURANCE COMPANY OF BOSTON

**Current Principal Place of Business:**

175 BERKELEY STREET  
BOSTON MASSACHUSETTS, MA 021170140 US

**New Principal Place of Business:**

**Current Mailing Address:**

GINA HUDSON  
175 BERKELEY ST. STE 10-B  
BOSTON, MA 02117140 US

**New Mailing Address:**

**FEI Number:** 04-6076039      **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: DCEO  
Name: KELLY, EDMUND F  
Address: 175 BERKELEY ST.  
City-St-Zip: BOSTON, MA 02116

Title: D  
Name: MANSFIELD, CHRISTOPHER C  
Address: 175 BERKELEY ST.  
City-St-Zip: BOSTON, MA 02116

Title: PD  
Name: LONG, DAVID H  
Address: 175 BERKELEY ST.  
City-St-Zip: BOSTON, MA 02116

Title: T  
Name: YAHIA, LAURANCE H  
Address: 175 BERKELEY ST.  
City-St-Zip: BOSTON, MA 02116

Title: SEC  
Name: LEGG, DEXTER R  
Address: 175 BERKELEY ST.  
City-St-Zip: BOSTON, MA 02116

Title: ASEC  
Name: CIOTTI, KRISTIN K  
Address: 175 BERKELEY ST  
City-St-Zip: BOSTON, M 02116

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: KRISTIN K. CIOTTI

ASEC

04/27/2011

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

\_\_\_\_\_ Date