2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# 830697

Entity Name: U.S. FINANCIAL LIFE INSURANCE COMPANY

Current Principal Place of Business:

4000 SMITH ROAD
SUITE 300
CINCINNATI, OH 45209 US

New Principal Place of Business:

Current Mailing Address:

1290 AVENUE OF THE AMERICAS
ATTN: S. STERLING
NEW YORK, NY 10104

New Mailing Address:

FEI Number: 38-2046096 **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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	COB	( ) Delete
Name:	DZIADZIO, RICHARD	
Address:	1290 AVENUE OF THE AMERICAS	
City-St-Zip:	NEW YORK, NY 10104 US	
Title:	S	( ) Delete
Name:	VARLACK, CAMILLE J	
Address:	1290 AVENUE OF THE AMERICAS	
City-St-Zip:	NEW YORK, NY 10104 US	
Title:	SVP	( ) Delete
Name:	BYRNE, KEVIN R	
Address:	1290 AVENUE OF THE AMERICAS	
City-St-Zip:	NEW YORK, NY 10104 US	
Title:	D	( ) Delete
Name:	FERRELL, MARY BETH	
Address:	1290 AVENUE OF THE AMERICAS	
City-St-Zip:	NEW YORK, NY 10104 US	
Title:	VP	( ) Delete
Name:	ZINK, S. VINCENT	
Address:	4000 SMITH ROAD, SUITE 300	
City-St-Zip:	CINCINNATI, OH 45209 US	
Title:	VPT	( ) Delete
Name:	MILLER, CHARLES E	
Address:	4000 SMITH ROAD, SUITE 300	
City-St-Zip:	CINCINNATI, OH 45209 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	BOUCHER, PAUL R	
Address:	1290 AVENUE OF THE AMERICAS	
City-St-Zip:	NEW YORK, NY 10104 US	
Title:	SVPT	(X) Change ( ) Addition
Name:	BYRNE, KEVIN R	
Address:	1290 AVENUE OF THE AMERICAS	
City-St-Zip:	NEW YORK, NY 10104 US	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CAMILLE JOSEPH VARLACK SEC 01/08/2009
Electronic Signature of Signing Officer or Director Date