

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 834964**

1. Entity Name

MONY LIFE INSURANCE COMPANY OF AMERICA**FILED****May 24, 2000 8:00 am**
Secretary of State

05-24-2000 90003 020 ***150.00

Principal Place of Business

Mailing Address

1740 BROADWAY
MAIL DEOP 11-26
NEW YORK, N Y 10019
US1740 BROADWAY
MAILDROP 11-26
NEW YORK, N Y 10019-4315
US

2. Principal Place of Business

1740 Broadway

3. Mailing Address

1740 Broadway

Suite, Apt. #, etc.
Mail Drop 7-21Suite, Apt. #, etc.
Mail Drop 7-21City & State
New York, New YorkCity & State
New York, New York4. FEI Number **86-0222062**

Applied For

Not Applicable

Zip
10019Country
USAZip
10019Country
USA5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required****6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**INSURANCE COMMISSIONER OF FLORIDA
CAPITOL BLDG.
TALLAHASSEE FL

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees****11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE **S** ☐ Delete
NAME **WALDMAN, DAVID S.**
STREET ADDRESS **1740 BROADWAY**
CITY-ST-ZIP **NEW YORK NY 10019**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **PD** ☐ Delete
NAME **FOTI, SAMUEL J**
STREET ADDRESS **1740 BROADWAY**
CITY-ST-ZIP **NEW YORK NY**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **T** ☐ Delete
NAME **WEIGEL, DAVID V.**
STREET ADDRESS **500 FRANK W BURR BLVD**
CITY-ST-ZIP **TEANECK NJ**TITLE **T** ☒ Change ☐ Addition
NAME **Weigel, David V.**
STREET ADDRESS **1740 Broadway**
CITY-ST-ZIP **New York, NY 10019**TITLE **VAD** ☐ Delete
NAME **EISENBERG, PHILLIP A**
STREET ADDRESS **1740 BROADWAY**
CITY-ST-ZIP **TEANECK NJ 10019**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **PDC** ☐ Delete
NAME **ROTH, MICHAEL I**
STREET ADDRESS **1740 BROADWAY**
CITY-ST-ZIP **NEW YORK NY**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **VCD** ☐ Delete
NAME **DADDARIO, RICHARD**
STREET ADDRESS **1740 BROADWAY**
CITY-ST-ZIP **TEANECK NJ 10019**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other life empowers.

SIGNATURE:SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Michael I. Roth, Chairman and Chief Executive Officer

Date

Daytime Phone #

4/24/00**(212) 708-2926**

CR2E034 (9/99)

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MONY Life Insurance Company of America

<u>Title</u>	<u>Name</u>	<u>Address</u>
Director, Chairman & Chief Executive Officer	Michael I. Roth	1740 Broadway New York, NY 10019
Director, President & Chief Operating Officer	Samuel J. Foti	1740 Broadway New York, NY 10019
Director & Executive Vice President	Kenneth M. Levine	1740 Broadway New York, NY 10019
Director, Vice President & Controller	Richard Daddario	1740 Broadway New York, NY 10019
Director, Vice President & Actuary	Phillip A. Eisenberg	1740 Broadway New York, NY 10019
Director & Vice President	Margaret G. Gale	1 MONY Plaza Syracuse, NY 13221
Director, Vice President & Chief Compliance Officer	Charles P. Leone	1740 Broadway New York, NY 10019
Director	Richard E. Connors	1740 Broadway New York, NY 10019
Director	Stephen J. Hall	1740 Broadway New York, NY 10019
Vice President	Sam Chiodo	1740 Broadway New York, NY 10019

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Vice President	William D. Goodwin	1740 Broadway New York, NY 10019
Vice President	Evelyn L. Peos	1740 Broadway New York, NY 10019
Vice President	Michael Slipowitz	1740 Broadway New York, NY 10019
Vice President	Steven G. Orluck	1740 Broadway New York, NY 10019
Secretary	David S. Waldman	1740 Broadway New York, NY 10019
Treasurer	David V. Weigel	1740 Broadway New York, NY 10019