

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **837594** (1)  
1. Corporation Name  
**THE NORTH WEST LIFE ASSURANCE COMPANY OF CANADA**



Principal Place of Business: **800-1040 W GEORGIA ST VANCOUVER, BRITISH COLUMBIA**  
Mailing Address: **800-1040 W GEORGIA ST VANCOUVER, BRITISH COLUMBIA**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>12/28/1976</b>	3a. Date of Last Report <b>06/05/1995</b>
21	Suite, Apt #, etc.	26	Suite, Apt #, etc.	4. FEI Number <b>98-0018913</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>WEEDON, GERALD W. 1200 GULF LIFE DR. SUITE 800 JACKSONVILLE FL 32207</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 \_\_\_\_\_ (Signature typed or printed name of registered agent and the filer applicable) (NOTE: Registered Agent sign-off is required when filing this) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BEGIN, ROBERT</b>	1.2 NAME	
STREET ADDRESS	<b>3445 BOUL HAWEY</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>BEAUPORT, QUEBEC</b>	1.4 CITY-ST-ZIP	
TITLE	<b>V</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PEPPER, RON W.</b>	2.2 NAME	
STREET ADDRESS	<b>1435 HARBOUR DRIVE</b>	2.3 STREET ADDRESS	<b>#303 - 1369 Spyglass Place</b>
CITY-ST-ZIP	<b>COQUITLAM, B.C.</b>	2.4 CITY-ST-ZIP	<b>Vancouver, B.C.</b>
TITLE	<b>VS</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PUTZ, ARTHUR W</b>	3.2 NAME	
STREET ADDRESS	<b>702-2150 W 40 AVENUE</b>	3.3 STREET ADDRESS	<b>5771 Yew Street</b>
CITY-ST-ZIP	<b>VANCOUVER, B.C.</b>	3.4 CITY-ST-ZIP	<b>Vancouver, B.C.</b>
TITLE	<b>V</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FRANCIS, DONALD R.</b>	4.2 NAME	
STREET ADDRESS	<b>1059 CLYDE AVENUE</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WEST VANCOUVER BC</b>	4.4 CITY-ST-ZIP	
TITLE	<b>DP</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GILL, JOHN</b>	5.2 NAME	
STREET ADDRESS	<b>6994 YEW STREET</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>VANCOUVER, B.C.</b>	5.4 CITY-ST-ZIP	
TITLE	<b>V</b> <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MCKAY, HUGH J</b>	6.2 NAME	
STREET ADDRESS	<b>2330 ONEIDA DR</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>COQUITLAM, BC</b>	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE: *Arthur W. Putz* **Arthur W. Putz** April 15, 1996 604-689-1211  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vice-President & Secretary

CR2E034 (12/95)

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**FLORIDA DEPARTMENT OF STATE  
1996 PROFIT CORPORATION ANNUAL REPORT**

**THE NORTH WEST LIFE ASSURANCE COMPANY OF CANADA  
COMPLETE LIST OF DIRECTORS AND OFFICERS NOT INCLUDED IN LIST, BOX 12  
AT DECEMBER 31, 1995**

- V - TUTT, TYRONNE  
#604 - 1010 Burnaby Street  
Vancouver, B.C.
- V - MOHAMED, ZULIFIKAR K.  
3541 West King Edward Avenue  
Vancouver, B.C.
- V - BELL, HERB  
220 Joaquin Drive  
Danville, California
- V - HARDING, DONALD  
2 Wagner Drive  
Scarborough, Ontario
- CD - GARNEAU, RAYMOND  
104 - 4700 Ste. Catherine West  
Montreal, Quebec
- D - BRUNET, PIERRE  
3465 Rue Redpath  
Montreal, Quebec
- D - HOWE, BRUCE I.  
4715 West 2nd Avenue  
Vancouver, B.C.
- D - MARKIN, ROM  
N.W. 305 Janet Street  
Pullman, Washington
- D - MURPHY, C. FRANCIS  
6050 Athlone Street  
Vancouver, B.C.
- D - PEPIN, NORMAND  
1185 Place Etienne-Letellier  
Cap-Rouge, Quebec
- D - VAN GENDEREN, WARREN  
65 Kirkland Avenue, #306  
Kirkland, Washington