2006 FOR PROFIT CORPORATION

Feb 28, 2006 8:00 am ANNUAL REPORT Secretary of State **DOCUMENT #841054** 02-28-2006 90013 027 ***150.00 LONDON LIFE REINSURANCE COMPANY Principal Place of Business Mailing Address 1787 SENTRY PKWY WEST PO BOX 1120 50000374 BLUE BELL, PA 19422-0319 US STE 420 BLUE BELL, PA 19422-2200 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 02052006 CR2E034 (11/05) Cha-P City & State City & State 4. FEI Number Applied For 23-2044256 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) Street Address (P.O. Box Number is Not Acceptable) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be П Trust Fund Contribution. OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition HAINER, MONICA M. NAME NAME STREET ADDRESS 130 WENTWORTH DR STREET ADDRESS LANSDALE, PA 19446 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME HAZEL, RAYMOND J. NAME STREET ADDRESS 7 DAYLILLY COURT STREET ADDRESS CITY-ST-ZIP WILMINGTON, DE 19808 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition POULIN, JEAN-FRANÇOIS NAME NAME **527 BOOKBINDER WAY** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LANSDALE, PA 19446 CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Change Addition TUCCI, PETER J. NAME STREET ADDRESS 34 BROOKS BEND DR STREET ADDRESS CITY-ST-ZIP NEW HOPE, PA 18938 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition DENTON, A L NAME NAME STREET ADDRESS 1828 GRAVERS RD STREET ADDRESS CITY-ST-ZIP PLYMOUTH, PA 19401 CITY-ST-ZIP TITLE Delete Change ■ Addition Saltsman, Debra J. SALISMAN, DEBRA S NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

3852 HALLMAN AVE

COLLEGEVILLE, PA 19426

STREET ADDRESS

CITY-ST-ZIP

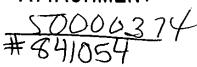
NATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

215-542-7200

FILED



LONDON LIFE REINSURANCE COMPANY



Raymond J. Hazel
Vice President Finance & CFO

February 24, 2006

Florida Department of State Attn: Division of Corporations P.O. Box 1500 Tallahassee, FL 32303-1500 Certified Mail
Return Receipt Requested

Dear Division:

Please find enclosed the 2006 For Profit Corporation Annual Report, which you have requested. Payment of the \$150 fee is enclosed.

Sincerely,

Raymond J. Hazel

Tup grt

Vice President Finance & CFO

Enclosures