

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 22, 2003 8:00 am
Secretary of State

08-22-2003 90107 039 ***550.00

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DOCUMENT # 841054

1. Entity Name
LONDON LIFE REINSURANCE COMPANY



Principal Place of Business
**1787 SENTRY PKWY WEST
STE 420
BLUE BELL PA 19422-0778
US**

Mailing Address
**PO BOX 1120
BLUE BELL PA 19422-0778
US**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
Zip Country

4. FEI Number **23-2044256**
Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
**CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE FL 32399-0000**

7. Name and Address of New Registered Agent
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAINER, MONICA M. 130 WENTWORTH DR LANSDALE PA <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS HAZEL, RAYMOND J. 7 DAYLILLY COURT WILMINGTON DE <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V POULIN, JEAN-FRANCOIS 527 BOOKBINDER WAY LANSDALE PA <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TUCCI, PETER J. 34 BROODSBEND DR NEW HOPE PA 18938 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DUNN, C B 1402 UXBRIDGE WAY NORTH WALES PA 19454 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DENTON, A L 1828 GRAVERS RD PLYMOUTH PA 19401 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: Raymond J. Hazel **8/18/03** **215-542-7200**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

LONDON LIFE
REINSURANCE
COMPANY

Attachment

80140011
841054

Title: D
Name: Paul X. Kelley
Street: 1600 N. Oak Street, #1619
City/State/Zip Code: Arlington, VA 22209

Title: D
Name: Thomas E. Stiles
Street: Six Harmony Way
City/State/Zip Code: Newtown, PA 18940

Title: D
Name: William G. Tull
Street: 11311 South Glen Rd.
City/State/Zip Code: Potomac, MD 20854

Title: D
Name: Paul Zelenkofske
Street: Woodfield/6514 Northwest 39th Terrace
City/State/Zip Code: Boca Raton, FL 33496

Title: V
Name: Debra J. Saltsman
Street: 1304 Marlbrook Lane
City/State/Zip Code: Lansdale, PA 19446

Title: T
Name: George C. Hawkinson
Street: 3253 Wellington St.
City/State/Zip Code: Philadelphia, PA 19149



London Life Reinsurance Company is a subsidiary of London Reinsurance Group

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P.O. Box 1120, Blue Bell, PA 19422-0319
(215) 542-7200 FAX (215) 542-1295