

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000719

FILED
Mar 19, 2009
Secretary of State

Entity Name: ALLIANZ LIFE AND ANNUITY COMPANY

Current Principal Place of Business:

5701 GOLDEN HILLS DR.
MINNEAPOLIS, MN 55416

New Principal Place of Business:

Current Mailing Address:

5701 GOLDEN HILLS DR.
MINNEAPOLIS, MN 55416

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUZZO, VICKIE
100 FOUNTAIN PARKWAY
ST. PETERSBURG, FL 33716 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: DP () Delete
Name: BHOJWANI, GARY
Address: 5701 GOLDEN HILLS DR
City-St-Zip: MINNEAPOLIS, MN 55416

Title: VPD () Delete
Name: MCKAY, NEIL
Address: 5701 GOLDEN HILLS DR
City-St-Zip: MINNEAPOLIS, MN 55416

Title: DCFO () Delete
Name: PATERSON, JILL
Address: 5701 GOLDEN HILLS DR
City-St-Zip: MINNEAPOLIS, MN 55416

Title: DS () Delete
Name: PEVEHOUSE, CYNTHIA
Address: 5701 GOLDEN HILLS DR
City-St-Zip: MINNEAPOLIS, MN 55416

Title: DT () Delete
Name: TERZARIOL, GIULIO
Address: 5701 GOLDEN HILLS DR
City-St-Zip: MINNEAPOLIS, MN 55416

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCED (X) Change () Addition
Name: BHOJWANI, GARY C PCEODIR
Address: 5701 GOLDEN HILLS DR.
City-St-Zip: MINNEAPOLIS, MN 55416

Title: VPD (X) Change () Addition
Name: MCKAY, NEIL VPDIR
Address: 5701 GOLDEN HILLS DR.
City-St-Zip: MINNEAPOLIS, MN 55416

Title: SECD (X) Change () Addition
Name: PHILIPS, MAUREEN SECDIR
Address: 5701 GOLDEN HILLS DR.
City-St-Zip: MINNEAPOLIS, MN 55416

Title: TDCF (X) Change () Addition
Name: TERZARIOL, GIULIO TREDCFO
Address: 5701 GOLDEN HILLS DR.
City-St-Zip: MINNEAPOLIS, MN 55416

Title: DIR (X) Change () Addition
Name: ZEHREN, AXEL DIR
Address: 5701 GOLDEN HILLS DR.
City-St-Zip: MINNEAPOLIS, MN 55416

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: LAURA LOUIS

_____ Electronic Signature of Signing Officer or Director

POA

03/19/2009

_____ Date