


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-20-2004 90008 038 ***150.00

DOCUMENT # P00407

1. Entity Name
~~CLARICA LIFE REINSURANCE COMPANY~~
General: USA Life Reassurance Company



Principal Place of Business
 700 KARNES BLVD
 KANSAS CITY, MO 64108 CA

Mailing Address
 700 KARNES BLVD
 SUITE 300 P O BOX 503
 KANSAS CITY, MO 64108 CA

2. Principal Place of Business
 8330 Ward Parkway
 Suite, Apt. #, etc.

3. Mailing Address
 P.O. Box 419076
 Suite, Apt. #, etc.

City & State
 Kansas City, MO

City & State
 Kansas City, MO

Zip Country
 64114 USA

Zip Country
 64141-6076 USA



02132004 Chg-P CR2E034 (10/03)

4. FEI Number
 13-3126819

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 \$150.00
After May 1, 2004 Fee will be \$550.00

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	C BALZER, GIORGIO 46 MENHAM RD BERNARDSVILLE, NJ 07924 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO JARDIN, ALEXANDER 5255 WARD PARKWAY KANSAS CITY, MO 64112 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KINNAMON, JAY B 12528 CONNELL OVERLAND PARK, KS 66213 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LYNCH, MICHAEL 2205 NW SUMMERFIELD LEES SUMMIT, MO 64081 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V William M. Crouch 13147 Rosewood Overland Park, KS 66209 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Terry D. Dickinson 2180 Xene Lane N. Plymouth MN 55447 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V David A. Gates 10255 S North Lake Circle Olathe, KS 66061 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Stephen J. Dvorak 8824 Telford Crossing Brooklyn Park, MN 55443 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Tamora A. Kapeller 5014 Summit Shawnee, KS 66216 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Mark D. Laulainen 1958 Stinson Parkway Minneapolis, MN 55418 <input type="checkbox"/> Change <input checked="" 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: *Michael J Lynch* **Michael J Lynch** **2-13-04** **816-412-3660**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

continued..

Attachment

24013313

#P00407

Attachment to 2004 For Profit Corporation Annual Report (Florida)

Generali USA Life Reassurance Company
8330 Ward Parkway
Kansas City, MO 64114

Continuation of Block 11 -- Additions/Changes to Officers and Directors

The following are ALL Additions.

V

Myron K. Lutz
14211 West 74th Terrace
Shawnee, KS 66216

V

James R. Makin
2618 West 92nd Street
Leawood, KS 66206

V

Randall E. Meyer
22020 Lackman Road
Spring Hill, KS 66083

V

Richard J. Swetala
211 East 68th Street
Kansas City, MO 64113

V

Todd L. Tretsven
769 Country Lakes Drive
Lino Lakes, MN 55014

V

Lesia R. Troesser
3511 West 48th Terrace
Roeland Park, KS 66205