

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

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Suzanne E. Workman  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

95 MAY -1 PM 2:48

**DOCUMENT # P02518 (9)**  
1. Corporation Name  
**NATIONAL HOME LIFE ASSURANCE COMPANY OF NEW YORK**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**520 COLUMBIA DRIVE JOHNSON CITY NY 13790**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **06/25/1984** 3a. Date of Last Report **04/29/1994**

2. Principal Place of Business 2a. Mailing Address

4. FEI Number **21-1743523** Applied For  Not Applicable

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

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

22. City & State 27. City & State

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

23. Zip Country 28. Zip Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of Now Registered Agent

**INSURANCE COMMISSIONER  
THE CAPITOL  
TALLAHASSEE FL 32301**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

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 fee if applicable

NOTE: Registered Agent signature required when receiving

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>VT</b>
NAME	<b>NESSPOR, THOMAS B.</b>
STREET ADDRESS	<b>LIBERTY PARK</b>
CITY-ST-ZIP	<b>FRAZER PA</b>
TITLE	<b>VDS</b>
NAME	<b>SOUDERS, RONALD L.</b>
STREET ADDRESS	<b>LIBERTY PARK</b>
CITY-ST-ZIP	<b>FRAZER PA</b>
TITLE	<b>CEO</b>
NAME	<b>GODWIN, PAMELA H</b>
STREET ADDRESS	<b>LIBERTY PARK</b>
CITY-ST-ZIP	<b>FRAZER PA</b>
TITLE	<b>VPD</b>
NAME	<b>DEHAVEN, MICHAEL A</b>
STREET ADDRESS	<b>LIBERTY PARK</b>
CITY-ST-ZIP	<b>FRAZER PA</b>
TITLE	<b>AS</b>
NAME	<b>MALINYAK, MARY ANN ASST</b>
STREET ADDRESS	<b>LIBERTY PARK</b>
CITY-ST-ZIP	<b>FRAZER PA</b>
TITLE	<b>D</b>
NAME	<b>BRIAN HOWARD PERRY</b>
STREET ADDRESS	<b>47 GRAND AVENUE</b>
CITY-ST-ZIP	<b>JOHNSON CITY NY 13790</b>

1. TITLE	<b>V</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE	<b>V/S/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<b>David R. Aplington</b>	
23 STREET ADDRESS	<b>Liberty Park</b>	
24 CITY-ST-ZIP	<b>Frazer, PA 19355</b>	
31 TITLE	<b>CEO/P/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	<b>Daniel C. Snyder</b>	
33 STREET ADDRESS	<b>Liberty Park</b>	
34 CITY-ST-ZIP	<b>Frazer, PA 19355</b>	
41 TITLE	<b>V/D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	<b>Earl W. Baucom</b>	
43 STREET ADDRESS	<b>Liberty Park</b>	
44 CITY-ST-ZIP	<b>Frazer, PA 19355</b>	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

*Mary Ann Malinyak*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Division/Division #

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**NATIONAL HOME LIFE ASSURANCE COMPANY OF NEW YORK  
ADDITIONAL OFFICERS AND DIRECTORS**

Senior Vice President	Roland A. LaPlante Liberty Park Frazer, PA 19355
Senior Vice President/Human Resources and Corporate Communications and Director	John H. Rogers Liberty Park Frazer, PA 19355
Senior Vice President	David B. Smith 400 W. Market Street Louisville, KY 40202
Senior Vice President & Director	Martin Renninger Liberty Park Frazer, PA 19355
Vice President and Treasurer	Anita R. Tilley Liberty Park Frazer, PA 19355
Vice President and Controller	Charles F. Talaber Liberty Park Frazer, PA 19355
Vice President	Dale E. Cooper 400 W. Market Street Louisville, KY 40202
Vice President	Carolyn M. Kerstein 400 W. Market Street Louisville, KY 40202
Vice President and Actuary	G. Douglas Mangum, Jr. Liberty Park Frazer, PA 19355
Vice President	Kevin P. McGlynn Liberty Park Frazer, PA 19355
Vice President & Director	Thomas B. Nesspor Liberty Park Frazer, PA 19355
Vice President and Actuary	John C. Prestwood, Jr. Liberty Park Frazer, PA 19355
Vice President	Nancy B. Schuckert Liberty Park Frazer, PA 19355

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Vice President

Michael A. Simpson  
Liberty Park  
Frazer, PA 19355

Vice President

Joseph D. Strenk  
400 W. Market Street  
Louisville, KY 40202

Vice President/Policy Service

John H. Claflin  
Liberty Park  
Frazer, PA 19355

Assistant Secretary

Mary Ann Malinyak  
Liberty Park  
Frazer, PA 19355

Director

I. Donald Britton  
210 Williamsburg Road  
Ardmore, PA 19003

Director

Patricia A. Collins  
80 Moeller Street  
Binghamton, NY 13904

Director

Jack M. Dann  
222 Ackley Avenue  
Johnson City, NY 13790

Director

Jeffrey H. Goldberger  
211 Court Street  
P. O. Box 1616  
Binghamton, NY 13902

Director

Rosalie M. Smith  
520 Columbia Drive  
Johnson City, NY 13790