

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2002 8:00 am
Secretary of State

01-17-2002 90013 029 ***150.00

U.S. / BRS A1

DOCUMENT # 812200

1. Entity Name

LIFE INSURANCE COMPANY OF NORTH AMERICA

Principal Place of Business

% ROBERT J. UPTON
1601 CHESTNUT ST
PHILADELPHIA, PA 19192

Mailing Address

ROBERT J. ~~UPTON~~ UPTON
1601 CHESTNUT ST. TL48G
PHILADELPHIA PA 19192-2362

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **23-1503749**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE FL 32301**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BELL, MICHAEL W 1601 CHESTNUT ST PHILADELPHIA PA 19192	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT MCHALE, BARRY R 1601 CHESTNUT ST PHILADELPHIA PA 19192	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VOGT, PETER J 1601 CHESTNUT ST PHILADELPHIA PA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S UPTON, ROBERT J 1601 CHESTNUT ST PHILADELPHIA PA 19192	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV REISENWITZ, ERIC M 1601 CHESTNUT ST PHILADELPHIA PA 19192	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DURNING, LUGINA J 1601 CHESTNUT ST PHILADELPHIA PA 19192	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PHILADELPHIA PA 19192 <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	DURNING, LUCINDA J <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/7/02

215.761.1977

CR2E034 (9/01)

Attachment
Doc# 812200/804921

Copyright 1998,2000 United Parcel Service, All Rights Reserved.
If you need local information and support.

[Go To Home Page](#)

[Log Out](#)

LEGAL PUBLIC AFFAIRS
MICHAEL J. WAGNER ESQ.
1601 CHESTNUT ST
215-761-3618
PHILADELPHIA PA 19103

1 OF 1

SHIP TO: DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE
409 EAST GAINES STREET
850-488-9000
TALLAHASSEE FL 32399



(420) SHIP TO POSTAL CODE



(420) 32399

UPS NEXT DAY AIR

1

TRACKING #: 1Z E30 8E4 01 1396 6333



57001795

UPS Professional Services EssLabel System. v1.01