

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 820148

FILED
Feb 24, 2010
Secretary of State

Entity Name: AVIVA LIFE AND ANNUITY COMPANY OF NEW YORK

Current Principal Place of Business:

65 FROELICH FARM BLVD.
WOODBURY, NY 11797

New Principal Place of Business:

Current Mailing Address:

699 WALNUT STREET
STE 1400
DES MOINES, IA 50309

New Mailing Address:

FEI Number: 13-1970218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 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: D
Name: GODLASKY, THOMAS C
Address: 699 WALNUT
City-St-Zip: DES MOINES, IA 50309

Title: S
Name: MILLER, MICHAEL H
Address: 699 WALNUT STREET
City-St-Zip: DES MOINES, IA 50309

Title: P/D
Name: LITTLEFIELD, CHRISTOPHER J
Address: 699 WALNUT ST.
City-St-Zip: DES MOINES, IA 50309

Title: T
Name: CUSHING, BRENDA J
Address: 699 WALNUT STREET
City-St-Zip: DES MOINES, IA 50309

Title: V
Name: HENG, WILLIAM J
Address: 699 WALNUT STREET
City-St-Zip: DES MOINES, IA 50309

Title: D
Name: ARLEDGE, DAVID
Address: 699 WALNUT ST
City-St-Zip: DES MOINES, IA 50309

I hereby 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 all other like empowered.

SIGNATURE: DAVID M WINGERT

SVP

02/24/2010

Electronic Signature of Signing Officer or Director

Date