

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K26423

**FILED**  
**Apr 18, 2014**  
**Secretary of State**  
**CC2884886497**

**Entity Name:** HANNOVER LIFE REASSURANCE COMPANY OF AMERICA

**Current Principal Place of Business:**

200 S. ORANGE AVENUE - SUITE 1900  
ORLANDO, FL 32801

**Current Mailing Address:**

200 S. ORANGE AVENUE - SUITE 1900  
ORLANDO, FL 32801 US

**FEI Number:** 59-2859797

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NAJJAR, STEVEN B  
200 S. ORANGE AVE  
STE 1900  
ORLANDO, FL 32801 US

*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:** STEVEN B. NAJJAR

04/18/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR, CHAIRMAN	Title	SVP/TREASURER
Name	WALLIN, ULRICH	Name	MARTIN, GLEN E
Address	KARL WIECHERT ALLEE 50 30625	Address	200 S. ORANGE AVENUE - SUITE 1900
City-State-Zip:	HANNOVER GERMANY	City-State-Zip:	ORLANDO FL 32801
Title	DIRECTOR	Title	EXECUTIVE VICE PRESIDENT/CFO
Name	KELTY, WILLIAM J	Name	WHEAT, DAVID A
Address	701 8TH STREET, NW SUITE 700	Address	200 S. ORANGE AVENUE - SUITE 1900
City-State-Zip:	WASHINGTON DC 20001	City-State-Zip:	ORLANDO FL 32801
Title	DIRECTOR	Title	DIRECTOR, CEO, PRESIDENT
Name	VOGEL, ROLAND	Name	SCHAEFER, PETER R
Address	KARL WIECHERT ALLEE 50 30625	Address	200 S. ORANGE AVENUE - SUITE 1900
City-State-Zip:	HANNOVER GERMANY	City-State-Zip:	ORLANDO FL 32801
Title	DIRECTOR	Title	DIRECTOR, VC
Name	SCHEPER, CHARLES	Name	MILLER, KLAUS DR.
Address	632 RUSSELL STREET	Address	KARL WIECHERT ALLEE 50 30625
City-State-Zip:	COVINGTON KY 41011	City-State-Zip:	HANNOVER GERMANY

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*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:** STEVEN NAJJAR

EVP/SECRETARY

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BADER, EDWARD  
Address 64 JERRY DANIELS ROAD  
City-State-Zip: MARLBOROUGH CT 06447

Title DIRECTOR  
Name BRAZIEL, DENNIS  
Address ONE CITRUS BOWL PLACE  
City-State-Zip: ORLANDO FL 32805

Title DIRECTOR, VC  
Name BECKE, WOLF DR.  
Address KARL WIECHERT ALLEE 50  
30625  
City-State-Zip: HANNOVER GERMANY

Title EXECUTIVE VICE  
PRESIDENT/SECRETARY  
Name NAJJAR, STEVEN B  
Address 200 S. ORANGE AVENUE - SUITE 1900  
City-State-Zip: ORLANDO FL 32801