

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 812200

**Entity Name:** LIFE INSURANCE COMPANY OF NORTH AMERICA

**Current Principal Place of Business:**

1601 CHESTNUT STREET  
PHILADELPHIA, PA 19192

**Current Mailing Address:**

1601 CHESTNUT STREET  
PHILADELPHIA, PA 19192 US

**FEI Number:** 23-1503749

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST  
TALLAHASSEE, FL 32399-0000 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            MANDERS, MATTHEW G.  
Address        1601 CHESTNUT STREET  
City-State-Zip: PHILADELPHIA PA 19192

Title            VP ANDTREASURER  
Name            MCHALE, BARRY R.  
Address        1601 CHESTNUT STREET  
City-State-Zip: PHILADELPHIA PA 19192

Title            SECRETARY  
Name            KERN, SCOTT  
Address        1601 CHESTNUT STREET  
City-State-Zip: PHILADELPHIA PA 19192

Title            DIRECTOR  
Name            MARSTERS, MARK P.  
Address        1601 CHESTNUT STREET  
City-State-Zip: PHILADELPHIA PA 19192

Title            DIRECTOR  
Name            ROTTKAMP, JOHN T.  
Address        1601 CHESTNUT STREET  
City-State-Zip: PHILADELPHIA PA 19192

*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:** SCOTT KERN

**SECRETARY**

**04/07/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date