

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 831736

FILED
Jun 20, 2018
Secretary of State
CC4741667243

Entity Name: WILLIAM PENN LIFE INSURANCE COMPANY OF NEW YORK

Current Principal Place of Business:

70 EAST SUNRISE HIGHWAY
SUITE 500
VALLEY STREAM, NY 11581

Current Mailing Address:

3275 BENNETT CREEK AVENUE
FREDERICK, MD 21704 US

FEI Number: 13-1976260

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST
BOX 6200 (32314-6200)
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, CEO
Name HICKMAN, BERNARD L
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

Title SECRETARY, VP
Name NEWCOMBE, BRYAN R
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

Title VP, DIRECTOR, TREASURER, CFO
Name LOVE, ANDREW D
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

Title VP, DIRECTOR
Name JENKINS, SHARON P
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

Title DIRECTOR
Name LAMBERT, DEBORAH D
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

Title VP, DIRECTOR, COO
Name MORALES, JACQUELINE L
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

Title DIRECTOR
Name MURRIN, JOHN J
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

Title VP, DIRECTOR
Name THOMPSON, TROY
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

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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: BRYAN R. NEWCOMBE

VP, SECRETARY

06/20/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WALSH, THOMAS W
Address 3275 BENNETT CREEK AVENUE
City-State-Zip: FREDERICK MD 21704

Title SVP
Name HOLWEGER, MARK
Address 70 EAST SUNRISE HIGHWAY
 SUITE 500
City-State-Zip: VALLEY STREAM NY 11581