

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 840370

**Entity Name:** COMBINED LIFE INSURANCE COMPANY OF NEW YORK**Current Principal Place of Business:**13 CORNELL ROAD, 1ST FLOOR  
AIRPORT PARK  
LATHAM, NY 12110**Current Mailing Address:**13 CORNELL ROAD, 1ST FLOOR  
AIRPORT PARK  
LATHAM, NY 12110**FEI Number:** 14-1537177**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 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 P, DIRECTOR  
Name BENNETT, BRAD M  
Address 1000 N. MILWAUKEE AVE.  
City-State-Zip: GLENVIEW IL 60025

Title SECRETARY  
Name COLLINS, REBECCA L  
Address 111 E. WACKER DRIVE  
6TH FLOOR  
City-State-Zip: CHICAGO IL 60601

Title CFO, DIRECTOR  
Name SPITZER, DREW K.  
Address 1000 MILWAUKEE AVENUE  
City-State-Zip: GLENVIEW IL 60025

Title DIRECTOR  
Name CLANCY, EDWARD C.  
Address 1133 AVE OF THE AMERICAS  
City-State-Zip: NEW YORK NY 10036

Title EVPD  
Name LIPPAI, STEVEN E  
Address 1000 N. MILWAUKEE AVE.  
City-State-Zip: GLENVIEW IL 60025

Title T  
Name JORDAN, JOSEPH J  
Address 436 WALNUT STREET  
City-State-Zip: PHILADELPHIA PA 19106

Title DIRECTOR  
Name BODNER, FREDRIC L  
Address 13 CORNELL ROAD, 1ST FLOOR  
AIRPORT PARK  
City-State-Zip: LATHAM NY 12110

Title DIRECTOR  
Name DOPKINS, LEONARD A.  
Address 13 CORNELL ROAD, 1ST FLOOR  
AIRPORT PARK  
City-State-Zip: LATHAM NY 12110

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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:** REBECCA L. COLLINS**VP AND SECRETARY****03/13/2015**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                 DIRECTOR  
Name                SMITH, LEE M.  
Address            13 CORNELL ROAD, 1ST FLOOR  
                      AIRPORT PARK  
City-State-Zip:    LATHAM NY 12110

Title                 GENERAL COUNSEL  
Name                HELIN, CHAD J.  
Address            1000 MILAUKEE AVENUE  
                      6TH FLOOR  
City-State-Zip:    GLENVIEW IL 60025

Title                 SENIOR VICE PRESIDENT  
Name                ABERCROMBIE, DOUGLAS J.  
Address            1000 MILWAUKEE AVENUE  
                      6TH FLOOR  
City-State-Zip:    GLENVIEW IL 60025