

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 08, 2015
Secretary of State
CC9672225356

Entity Name: SHELTERPOINT LIFE INSURANCE COMPANY

Current Principal Place of Business:

600 NORTHERN BLVD, STE. 310
GREAT NECK, NY 11021

Current Mailing Address:

600 NORTHERN BLVD, STE. 310
GREAT NECK, NY 11021

FEI Number: 11-2284118

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 CHAIRMAN, DIRECTOR
Name GOLDBERG, SETH I
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title CEO, DIRECTOR
Name WHITE, RICHARD A
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title DIRECTOR
Name DOLMAN, GERALD
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title EVP, COO
Name LAPPAS, CONSTANTINE T
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title SECRETARY
Name SLACK, ROBERT
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title TREASURER, CFO
Name WALLACH, BRUCE L
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title DIRECTOR
Name RADONICH , MILAN M
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title DIRECTOR
Name SMITH , DEWITT M
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

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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: DAVID G. MELMAN

CHIEF LEGAL OFFICER

01/08/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HAWFIELD, WILLIAM H
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title VP- SALES
Name DAVID, EPSTEIN
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title SVP, CHIEF ACTUARY
Name HERMAN, SANFORD
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title VP - INFORMATION TECHNOLOGY
Name BEESON, MARY
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title DIRECTOR
Name GOLDBERG, MICHELLE J
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title VP- CLIENT SERVICES
Name MCAULIFFE, KATHLEEN
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title VP - MARKETING
Name ATIENZA, KATRIN
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021

Title CHIEF LEGAL OFFICER
Name MELMAN, DAVID G ESQ.
Address 600 NORTHERN BLVD, STE. 310
City-State-Zip: GREAT NECK NY 11021