

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00100

**FILED**  
**Apr 26, 2019**  
**Secretary of State**  
**6082122857CC**

**Entity Name:** LOMBARD INTERNATIONAL LIFE ASSURANCE COMPANY

**Current Principal Place of Business:**

1650 MARKET ST., 54TH FLOOR  
PHILADELPHIA, PA 19103

**Current Mailing Address:**

1650 MARKET ST., 54TH FLOOR  
PHILADELPHIA, PA 19103 US

**FEI Number:** 52-0795747

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
THE CAPITOL BLDG.  
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 EVP, CFO  
Name KEIM, KENT  
Address ONE LIBERTY PLACE, 1650 MARKET ST, 54TH FL  
City-State-Zip: PHILADELPHIA PA 19103

Title SECRETARY  
Name FILLIP, JOSEPH A.  
Address ONE LIBERTY PLACE, 1650 MARKET ST, 54TH FL  
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR  
Name BAIRD, PATRICK S.  
Address 1650 MARKET ST., 54TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR  
Name BECKER, NORBERT R.  
Address 1650 MARKET ST., 54TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR  
Name CHEE, MENES O.  
Address 1650 MARKET ST., 54TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR  
Name MILLER, DAVID J.  
Address 1650 MARKET ST., 54TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

Title PRESIDENT, CEO, DIRECTOR  
Name GORDON, MICHAEL J.  
Address 1650 MARKET ST., 54TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

Title DIRECTOR  
Name CARENDI, JAN  
Address 1650 MARKET ST., 54TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

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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:** JOSEPH A. FILLIP, JR.

**SNR LEGAL &  
COMPLIANCE  
SPECIALIST**

**04/26/2019**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           BOYLE, BRENDAN  
Address        1650 MARKET ST., 54TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

Title           DIRECTOR  
Name           LUDLOW, SHARON  
Address        1650 MARKET ST., 54TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103