## 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00100

Entity Name: PHILADELPHIA FINANCIAL LIFE ASSURANCE COMPANY

FILED
Jan 09, 2013
Secretary of State
CC9794605683

## **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 PDCE Title D

Name HILLMAN, JOHN K Name KAUFFMAN, GEOFFREY N

Address ONE LIBERTY PLACE, 1650 MARKET Address ONE LIBERTY PLACE, 1650 MARKET

ST, 54TH FL ST, 54TH FL

City-State-Zip: PHILADELPHIA PA 19103 City-State-Zip: PHILADELPHIA PA 19103

Title DV Title VT

Name FISCHER, JOHN Name KEIM, KENT

Address ONE LIBERTY PLACE, 1650 MARKET Address ONE LIBERTY PLACE, 1650 MARKET

ST, 54TH FL ST, 54TH FL

City-State-Zip: PHILADELPHIA PA 19103 City-State-Zip: PHILADELPHIA PA 19103

Title DVS

Name OBERLIES, SUSAN M

Address ONE LIBERTY PLACE, 1650 MARKET

ST, 54TH FL

City-State-Zip: PHILADELPHIA PA 19103

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: JOHN K. HILLMAN PRESIDENT 01/09/2013