

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 804766

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** THE UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK

**Current Principal Place of Business:**

830 THRID AVE.  
NEW YORK, NY 10022

**New Principal Place of Business:**

**Current Mailing Address:**

3600 ROUTE 66, P.O. BOX 1580  
GAAP DEPT. (MSN 4-K)  
NEPTUNE, NJ 077541580 US

**New Mailing Address:**

**FEI Number:** 13-5459480      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

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

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

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: MARTIN, JR R O  
Address: 2929 ALLEN PARKWAY  
City-St-Zip: HOUSTON, TX 77109

Title: V ( ) Delete  
Name: MARASH, RANDY J  
Address: 3600 ROUTE 66  
City-St-Zip: NEPTUNE, NJ 07754

Title: S ( ) Delete  
Name: TUCK, ELIZABETH M  
Address: 70 PINE STREET  
City-St-Zip: NEW YORK, NY 10270

Title: VT ( ) Delete  
Name: BEDNARSKI, WALTER E  
Address: 3600 RTE 66  
City-St-Zip: NEPTUNE, NJ 07754

Title: VCFO ( ) Delete  
Name: FORTIN, MARY JANE  
Address: 2929 ALLEN PRKWY  
City-St-Zip: HOUSTON, TX 77109

Title: CEOP ( ) Delete  
Name: WINTER, MATTHEW  
Address: 2929 ALLEN PARKWAY  
City-St-Zip: HOUSTON, TX 77109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: JENNINGS, KYLE L  
Address: 2727 ALLEN PARKWAY  
City-St-Zip: HOUSTON, TX 77019

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WALTER E. BEDNARSKI

VP

04/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date