

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jan 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 804890 (2)
1. Corporation Name
THE MUTUAL LIFE INSURANCE COMPANY OF NEW YORK

Principal Place of Business 1740 BROADWAY M.D. 8-11 NEW YORK NY 10019 US	Mailing Address 1740 BROADWAY M.D. 8-11 NEW YORK NY 10019 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 04/06/1938 4. FEI Number 13-1632487 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No
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9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE FL 32399

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

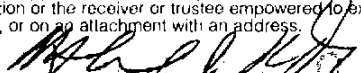
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	EVD LEVINE, KENNETH M 1740 BROADWAY NEW YORK NY	1.1 TITLE	☐ Change ☐ Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VPS CONKLIN, THOMAS J. 1740 BROADWAY NEW YORK NY	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	PCD POTI, SAMUEL J 1740 BROADWAY NEW YORK NY	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D FARLEY, JAMES B. 1740 BROADWAY NEW YORK NY	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	EVPC DADDARIO, RICHARD 1740 BROADWAY NEW YORK NY	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	CCD ROTH, MICHAEL I. 1740 BROADWAY NEW YORK NY	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



CR2E034 (10/97)

TRUSTEES OF THE MUTUAL LIFE INSURANCE COMPANY OF NEW YORK

<u>NAME</u>	<u>ADDRESS</u>
Claude Mark Ballard, Jr.	1800 Deerfield Road Dripping Springs, TX 78620
Tom H. Barrett	2135 Stockbridge Road Akron, OH 44313
David L. Call	108 Comstock Road Ithaca, NY 14850
G. Robert Durham	943 Seddon Cove Way Tampa, FL 33602
James B. Farley	Villa D'Este 2665 North Ocean Blvd. Delray Beach, FL 33483
Samuel J. Foti	1070 Lake Avenue Greenwich, CT 06831
Robert Holland, Jr.	257 Soundview Avenue White Plains, NY 10606
James L. Johnson	1603 Cottonwood Valley Circle No. Irving, TX 75038
Robert R. Kiley	59 E. 90th Street New York, NY 10128
Kenneth M. Levine	551 Wayne Drive River Vale, NJ 07675
John R. Meyer	975 Memorial Drive Apt. 405 Cambridge, MA 02138
Jane C. Pfeiffer	90 Field Point Circle Greenwich, CT 06830
Michael I. Roth	20 Pond View Lane Stamford, CT 06903
Thomas C. Theobald	2439 Lakeview Avenue Chicago, IL 60614

The Mutual Life Insurance Company of New York

Officer Listing

OFFICERS

<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>
Michael I. Roth	20 Pond View Lane Stamford, CT 06903	Chairman of the Board, and Chief Executive Officer
Samuel J. Foti	1070 Lake Avenue Greenwich, CT 06831	President, and Chief Operating Officer
Richard Daddario	103 Wild Duck Road Wilton, CT 06897	Executive Vice President and Chief Financial Officer
Kenneth M. Levine	551 Wayne Drive River Vale, NJ 07675	Executive Vice President and Chief Investment Officer
Thomas J. Conklin	24 Indian Hill Road Brewster, NY 10509	Senior Vice President and Secretary
Phillip A. Eisenberg	216 Sollas Court Ridgewood, NJ 07450	Senior Vice President and Chief Actuary
Richard E. Mulroy, Jr.	355 Kensington Dr. Ridgewood, NJ 07450	Senior Vice President and General Counsel
Richard E. Connors	33 Wild Turkey Court Ridgefield, CT 06877	Senior Vice President
Stephen J. Hall	501 Silvermine Road New Canaan, CT 06840	Senior Vice President
Francis J. Waldron	421 Stanwich Rd. Greenwich, CT 06830	Senior Vice President
Victor Ugolyn	17 Cardinal Court Ridgefield, CT 06877	Senior Vice President
David V. Weigel	40 Everdell Ave. Hillsdale, NJ 07642	Vice President-Treasurer