

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **809834 (5)**

1. Corporation Name  
**THE UNION LABOR LIFE INSURANCE COMPANY**



Principal Place of Business: 111 MASSACHUSETTS AVE.. NW WASHINGTON DC 20001  
Mailing Address: 111 MASSACHUSETTS AVE.. NW WASHINGTON DC 20001

3. Date Incorporated or Qualified <b>05/24/1954</b>	3a. Date of Last Report <b>01/27/1995</b>
4. FEI Number <b>13-1423090</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent <b>THE INSURANCE COMMISSIONER THE CAPITOL BLDG. TALLAHASSEE FL 32304</b>	10. Name and Address of New Registered Agent
	81. Name
	82. Street Address (P.O. Box Number is Not Acceptable)
	83.
	84. City
	85. Zip Code

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: CD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: GEORGINE, ROBERT, A		1.2 NAME	
STREET ADDRESS: 111 MASSACHUSETTS AVE NW		1.3 STREET ADDRESS	
CITY-ST-ZIP: WASHINGTON DC		1.4 CITY-ST-ZIP	
TITLE: STD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: NULL, LESTER, H, SR		2.2 NAME	
STREET ADDRESS: 111 MASSACHUSETTS AVE NW		2.3 STREET ADDRESS	
CITY-ST-ZIP: WASHINGTON DC		2.4 CITY-ST-ZIP	
TITLE: EV	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: LUCE, JAMES, W		3.2 NAME	
STREET ADDRESS: 111 MASSACHUSETTS AVE NW		3.3 STREET ADDRESS	
CITY-ST-ZIP: WASHINGTON DC		3.4 CITY-ST-ZIP	
TITLE: GCD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: MCNULTY, JAMES, F, M		4.2 NAME	
STREET ADDRESS: 111 MASSACHUSETTS AVE NW		4.3 STREET ADDRESS	
CITY-ST-ZIP: WASHINGTON DC		4.4 CITY-ST-ZIP	
TITLE: SV	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: CROSS, WILLIAM, L		5.2 NAME	
STREET ADDRESS: 111 MASSACHUSETTS AVE NW		5.3 STREET ADDRESS	
CITY-ST-ZIP: WASHINGTON DC		5.4 CITY-ST-ZIP	
TITLE: VS	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: CARABILLO, JOSEPH, A		6.2 NAME	
STREET ADDRESS: 111 MASSACHUSETTS AVE NW		6.3 STREET ADDRESS	
CITY-ST-ZIP: WASHINGTON DC		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Jan W. [Signature]* DATE: \_\_\_\_\_ (202) 682-0900  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (12/95)

**The Union Labor Life Insurance Company**

**OFFICERS LIST**

<b><u>TITLE</u></b>	<b><u>NAME</u></b>	<b><u>OFFICE ADDRESS</u></b>
Chairman & CEO	Robert A. Georgine	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
President	John F. Gentleman	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Secretary-Treasurer	Lester H. Null, Sr.	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Executive Vice President, Chief Operating Officer	James W. Luce	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Senior Vice President, Insurance Operations	Charles R. Sormani	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Senior Vice President, Investments	Michael R. Steed	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President-Chief Legal Officer & Assistant Secretary	Joseph A. Carabillo	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President, Actuary	Thomas B. Bowling	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President, Investments	Herbert C. Canapary	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President, National Sales Manager	Mark. A. Maloney	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Vice President, Controller	Daniel P. Spencer	111 Massachusetts Avenue, N.W. Washington, D.C. 20001

**The Union Labor Life Insurance Company**

**DIRECTORS LIST**

<b><u>NAME</u></b>	<b><u>OFFICE ADDRESS</u></b>
Robert A. Georgine	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
John F. Gentleman	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Lester H. Null, Sr.	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
John. J. Barry	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
Frank W. Carter	111 Massachusetts Avenue, N.W. Washington, D.C. 20001
John T. Joyce	111 Massachusetts Avenue, N.W. Washington, D.C. 20001