2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#820799

Entity Name: ALLSTATE ASSURANCE COMPANY

FILED Mar 17, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
3100 SANDERS ROAD NORTHBROOK, IL 60062 US					
Current Mailing Address:		New Maili	New Mailing Address:		
3075 SANDERS ROAD HIA NORTHBROOK, IL 60062 US					
FEI Number:	12-0930962	FEI Number Applied For () FEI I	Number Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 323990000 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	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADD			ADDITION	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CEO () De SYLLA, CASEY J 3100 SANDERS RO NORTHBROOK, IL	OAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () De VELOTTA, MICHAE 3100 SANDERS RO NORTHBROOK, IL	EL J OAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () De FRIEDMAN, MARL 3100 SANDERS R NORTHBROOK, IL	A G OAD	Title: Name: Address: City-St-Zip:	SV (X) Change () Addition FRIEDMAN, MARLA G 3100 SANDERS ROAD NORTHBROOK, IL 60062 US	
Title: Name: Address: City-St-Zip:	VD () De SHEBIK, STEVEN 3100 SANDERS RI NORTHBROOK, IL	E OAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VC () De PILCH, SAMUEL H 3100 SANDERS RI NORTHBROOK, IL	OAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VT () De ZILS, JAMES P 3075 SANDERS RI NORTHBROOK, IL	OAD	Title: Name: Address: City-St-Zip:	T (X) Change () Addition ZILS, JAMES P 3075 SANDERS ROAD NORTHBROOK, IL 60062	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LYNN CIRRINCIONE AR 03/17/2005