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Apr 17 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # **825204** (1)  
1. Corporation Name  
**TRANSAMERICA INSURANCE FINANCE CORPORATION**

Principal Place of Business  
**110 WEST ROAD, SUITE 235  
TOWSON MD 21204-2374  
US**

Mailing Address  
**110 WEST ROAD, SUITE 235  
TOWSON MD 21204-2318  
US**



2. Principal Place of Business 21 <b>170 Lawrence Bell Drive</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>9399 W. Higgins Rd.</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>10/16/1970</b>		3a. Date of Last Report <b>01/31/1996</b>	
22 <b>City &amp; State</b> 23 <b>Williamsville, NY</b> Zip 24 <b>14221</b>		27 <b>Suite 600</b> City & State 28 <b>Rosemont, IL</b> Zip 29 <b>60018</b>		4. FEI Number <b>52-0905063</b>		Applied For Not Applicable	
Country 25 <b>Erie</b>		Country 30 <b>Cook</b>		5. Certificate of Status Desired <input checked="" 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>	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No							

9. Name and Address of Current Registered Agent <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324</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				<b>FL</b>			

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 reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	D
NAME	READ, STEVEN A	1.2 NAME	
STREET ADDRESS	1599 WEST OLD MILL ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE FOREST IL 60045	1.4 CITY-ST-ZIP	
TITLE	SGM	2.1 TITLE	P
NAME	RAINEY, HUGH J	2.2 NAME	John G. Rakocy
STREET ADDRESS	11220 RIDERMARK ROW	2.3 STREET ADDRESS	854 Lincoln Avenue
CITY-ST-ZIP	COLUMBIA MD 21044	2.4 CITY-ST-ZIP	Winnetka, IL 60093
TITLE	V	3.1 TITLE	V
NAME	BROOKS, WILLIAM P.	3.2 NAME	Theodore J. Koeth
STREET ADDRESS	511 THISTELDOWN COURT	3.3 STREET ADDRESS	5 Wildwood Drive
CITY-ST-ZIP	MILLERSVILLE MD 21108	3.4 CITY-ST-ZIP	Lancaster, NY 14086
TITLE	SVP	4.1 TITLE	
NAME	APPELT, BRIAN G	4.2 NAME	
STREET ADDRESS	48 IRON MILL GARTH	4.3 STREET ADDRESS	1916 N. Windham Ct.
CITY-ST-ZIP	HUNT VALLEY MD 21030	4.4 CITY-ST-ZIP	Arlington Heights, IL 60004
TITLE	V	5.1 TITLE	V
NAME	DIMARTINO, ANGELO	5.2 NAME	Michael E. Reding
STREET ADDRESS	8563 WEST GREGORY	5.3 STREET ADDRESS	64 Vassar Drive
CITY-ST-ZIP	CHICAGO IL 60656	5.4 CITY-ST-ZIP	Getzville, NY 14068
TITLE	TDV	6.1 TITLE	
NAME	HAWKINS, DAVID H.	6.2 NAME	
STREET ADDRESS	2655 BRODERICK STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94123	6.4 CITY-ST-ZIP	

14. I do 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: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/97 (847) 685-1166

Date Daytime Phone #

CR2E034 (9/96)

**DIRECTORY OF TRANSAMERICA INSURANCE FINANCE CORPORATION**  
**(a Maryland Corporation)**

**DIRECTORS AND OFFICERS, RESIDENCE ADDRESSES AND TITLES**

John G. Rakocy	854 Lincoln Avenue Winnetka, Illinois 60093	President Director
Steven A. Read	1599 West Old Mill Road Lake Forest, Illinois 60045	Director
Brian G. Appelt	1916 N. Windham Court Arlington Heights, IL 60004	Vice President General Counsel Secretary
S. Edward Ferrell	90 Huntington Avenue, #90 Buffalo, New York 14214	Vice President, Human Resources
David H. Hawkins	2655 Broderick Street San Francisco, California 94123	Vice President Treasurer Director
Theodore J. Koeth	5 Wildwood Drive Lancaster, New York 14086	Vice President, Origination & Risk Management
Lawrence A. Mabbitt	155 Harbor Road Barrington, Illinois 60010	Vice President
Rosario A. Perrelli	740 Olive Parkway Bartlett, Illinois 60103	Vice President Controller
Ann M. Mason	4499 Rolling Meadows Ellicott City, Maryland 21043	Assistant Controller
Michael E. Reding	64 Vassar Drive Getzville, New York 14068	Vice President, Operations
Debra Lee Allen	7781 Paddock Way Baltimore, Maryland 21244	Senior Counsel Assistant Secretary
John J. Mohr	423 Prides Run Lake-in-the-Hills, Illinois 60102	Assistant Secretary