2000 UNIFORM BUSINESS REPORT (UBR)

0001383

DOCUMENT # 837140

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

AMERICAN SKANDIA LIFE ASSURANCE CORPORATION

Principal Place of Business	Mailing Address
ONE COPORATE DRIVE 10TH FLOOR SHELTON CT 06484	ATTN: ACCOUNTING P O BOX 883 SHELTON CT 06484-0883 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 06-1241288 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
INSURANCE COMMISSIONER 200 EAST GAINES STREET TALLAHASSEE FL 32304	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV DOKKEN, WADE A. 28 HIGH POINT RD EAST WESTPOINT CT 06880	☐ Delete	D 60 Singing Oaks Road Weston, CT 06883	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BORONOW, GORDON C 51 KILLIAN AVE TRUMBULL CT	☐ Delete	00000317041O--=9.. -03/15/00--01011--014 ****150.00	☐ Change ☐ Addition ****150.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAMPBELL, MALCOLM M SKARPGRAND 15 TABY, SWEDEN	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PANNELL, M P 39C ELM ST WOODSTOCK VT 05091	☐ Delete	11 Cross Street	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV MAZZAFERRO, THOMAS M. 75 HAMPSHIRE COURT CHESHIRE CT	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC CARENDI, JAN R. 8 GREAT MARSH RD WESTPORT CT	☐ Delete	KE	☐ Change ☐ Addition

CR2E034 (9/99)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ David R. Monroe, SVP, Treas & Corp. Contr. 2/25/2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 203-925-6984

FLORIDA 2000 CORPORATION ANNUAL REPORT ADDENDUM

American Skandia Life Assurance Corporation
One Corporate Drive
P. O. Box 883
Shelton, CT 06484

V
Arena, Robert M.

D/V
Brunetti, Nancy F.

V
Chan, Yat Kan

D/V
Collins, Lincoln R.

D
Danckwardt, Henrik G.

V
Darak, Harold Jeffrey

V
Hirst, Brian L.

V
Kuperstock, N. David

D
Moberg, Gunnar J.

T/V
Monroe, David R.

V
Rae, Polly

V
Runestad, Rodney D.

V
Shambelan, Lisa Joy

D/V
Söderström, Anders O.

V
Strong, William Henry

D/V
Sutyak, Amanda C.

D
Svensson, C. Åke

D
Tracy, Bayard F.

V
Ullness, Jeffrey M.