

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 839493

FILED  
Aug 24, 2010  
Secretary of State

Entity Name: SBHU LIFE AGENCY, INC.

**Current Principal Place of Business:**

388 GREEWICH ST  
NEW YORK, NY 10013

**New Principal Place of Business:**

1585 BROADWAY  
NEW YORK, NY 10036

**Current Mailing Address:**

PO BOX 30509  
TAX & REPORTING  
TAMPA, FL 33631 US

**New Mailing Address:**

1585 BROADWAY  
NEW YORK, NY 10036

FEI Number: 13-2896238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: JOHNSTON, CHARLES D  
Address: 1585 BROADWAY  
City-St-Zip: NEW YORK, NY 10036

Title: TRES  
Name: RIOS, ANITA  
Address: 1585 BROADWAY  
City-St-Zip: NEW YORK, NY 10036

Title: SEC  
Name: COONEY, ANNE  
Address: 1585 BROADWAY  
City-St-Zip: NEW YORK, NY 10036

Title: VP  
Name: PALLADINO, LOUIS A JR.  
Address: 1585 BROADWAY  
City-St-Zip: NEW YORK, NY 10036

Title: DIR  
Name: GELFAND, JEFFREY A  
Address: 1585 BROADWAY  
City-St-Zip: NEW YORK, NY 10036

Title: DIR  
Name: GORMAN, JAMES P  
Address: 1585 BROADWAY  
City-St-Zip: NEW YORK, NY 10036

I hereby 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 all other like empowered.

SIGNATURE: MICHELLE DONATO

POA

08/24/2010

Electronic Signature of Signing Officer or Director

Date