

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 840038

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

200 WESTLAKE PARK BLVD  
#1200  
HOUSTON, TX 77079 US

**New Principal Place of Business:**

11720 KATY FREEWAY  
#1700  
HOUSTON, TX 77079 US

**Current Mailing Address:**

P. O. BOX 4884  
HOUSTON, TX 772104884 US

**New Mailing Address:**

FEI Number: 74-1952955      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 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: PTD  
Name: CHEN, BILL S  
Address: 11720 KATY FREEWAY, SUITE 1700  
City-St-Zip: HOUSTON, TX 770791298 US

Title: S  
Name: FRAZIER, MARY D  
Address: 11720 KATY FREEWAY, SUITE 1700  
City-St-Zip: HOUSTON, TX 770791298 US

Title: V  
Name: LEE, JERRY  
Address: 11720 KATY FREEWAY, SUITE 1700  
City-St-Zip: HOUSTON, TX 770791298 US

Title: D  
Name: TAI, DAVID  
Address: 11720 KATY FREEWAY, SUITE 1700  
City-St-Zip: HOUSTON, TX 770791298 US

Title: D  
Name: CHEN, L. C.  
Address: 11720 KATY FREEWAY, SUITE 1700  
City-St-Zip: HOUSTON, TX 770791298 US

Title: D  
Name: WANG, DON J  
Address: 11720 KATY FREEWAY, SUITE 1700  
City-St-Zip: HOUSTON, TX 770791298 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SILVANA LAI

SVP

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date