

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **844135** (4)
1. Corporation Name
METROPOLITAN INSURANCE AND ANNUITY COMPANY



Principal Place of Business
**ONE MADISON AVENUE
NEW YORK, NY. 10010**

Mailing Address
**ONE MADISON AVENUE
NEW YORK, NY. 10010**

3. Date Incorporated or Qualified
09/14/1979

3a. Date of Last Report
05/01/1995

4. FEI Number
13-2876440

Applied For
☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**INSURANCE COMMISSIONER OF FLORIDA
CAPITOL BLDG.
TALLAHASSEE FL 32304**

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

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	COB	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CANNATELLA, ANTHONY C	1.2 NAME	
STREET ADDRESS	360 FIRST AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	1.4 CITY-ST-ZIP	
TITLE	AC	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARE, RONALD	2.2 NAME	
STREET ADDRESS	53-12 214TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	BAYSIDE, NY 11364	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KERRIGAN, WILLIAM D	3.2 NAME	
STREET ADDRESS	239 KOCIEMBA DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	RIVER VALE NJ	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REALI, JOSEPH A	4.2 NAME	Vice Pres. & Secretary
STREET ADDRESS	10 DOREE RD	4.3 STREET ADDRESS	Christine N. Markussen
CITY-ST-ZIP	MORGANVILLE FL	4.4 CITY-ST-ZIP	17 Indian Head Road
TITLE	PD	5.1 TITLE	Morris Township, NJ 07960
NAME	KAMEN, HARRY P	5.2 NAME	Treasurer
STREET ADDRESS	200 E. 78TH STREET	5.3 STREET ADDRESS	Arthur G. Typermass
CITY-ST-ZIP	NEW YORK NY	5.4 CITY-ST-ZIP	43 Chestnut St.
TITLE	VP	6.1 TITLE	Garden City, NY 11530
NAME	SHUMAN, IRA H	6.2 NAME	
STREET ADDRESS	436 ALBEMARLE RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	CEDARHURST NY	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

Ronald Mare 4/22/96 (212) 578-3763

CR2E034 (12/95)

DIRECTORS AND OFFICERS LISTING

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COMPANY: METROPOLITAN INSURANCE AND ANNUITY COMPANY
ROLE: DIRECTOR

Name

Title

AMODEO, ANTHONY E.	VICE-PRESIDENT AND ACTUARY
BLACKWELL, RICHARD M.	
CANNATELLA, ANTHONY C.	CHAIRMAN, PRESIDENT AND CEO
KERRIGAN, WILLIAM D.	VICE-PRESIDENT
LAZARESCU, ALAN E.	
LEFF, HAROLD B.	V.P. & OFFICER-IN-CHARGE OF BROKERAGE
WHITE, STEPHEN E.	
WILLIAMSON, ANTHONY J.	ASSISTANT TREASURER

Business Address of all Directors:
One Madison Ave
New York, NY 10010

DIRECTORS AND OFFICERS LISTING

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COMPANY: METROPOLITAN INSURANCE AND ANNUITY COMPANY
 ROLE: OFFICER

Name	Title
ABELA, JOHN P.	ASSISTANT VICE-PRESIDENT
AMODEO, ANTHONY E.	VICE-PRESIDENT AND ACTUARY
ANCHARSKI, JIM	ASSISTANT VICE-PRESIDENT
ARNHOLT, FREDERICK E.	VICE-PRESIDENT
BLAKESLEE, HOWARD	ACTUARY
BONANNO, ROBERT S.	VICE-PRESIDENT AND ASSISTANT SECRETARY
BRUINS, JOHN K.	ACTUARY
BURKE, LESLIE L.	SPECIAL DESIGNEE
CANNATELLA, ANTHONY C.	CHAIRMAN, PRESIDENT AND CEO
CAPPER, DONALD W.	VICE-PRESIDENT
CATES, STEVEN T.	VICE-PRESIDENT
CLARK, ELIZABETH S.	VICE-PRESIDENT
CURRAN, MICHAEL J.	VICE-PRESIDENT
DEENER, MALCOLM	ASSISTANT VICE-PRESIDENT
DERMA, DARLEEN M.	ASSISTANT VICE-PRESIDENT
DEVINE, DONALD K.	VICE-PRESIDENT
DICKERSON, JR., WENDELL F.	VICE-PRESIDENT
DIGNEY, JAMES B.	VICE-PRESIDENT
DUBOFF, HARVEY R.	VICE-PRESIDENT
DUNBAR, KENNETH R.	VICE-PRESIDENT
EDMISTON, CHARLES	ASSISTANT VICE-PRESIDENT
EDWARDS, ROBERT P.	VICE-PRESIDENT
FITZGERALD, JILL B.	ASSISTANT VICE-PRESIDENT
GARDELLA, WILLIAM P.	VICE-PRESIDENT AND ASSISTANT SECRETARY
GARDNER, BARBARA J.	ASSISTANT VICE-PRESIDENT
GLADITSCH, PETER E.	CONTROLLER
GOLDSTONE, M.D., ROBERT L.	MEDICAL DIRECTOR
GRAMLICH, RUSSELL J.	ASSISTANT VICE-PRESIDENT
HAMMER, NANCY J.	ASSISTANT VICE-PRESIDENT
HARWOOD, MICHAEL P.	ACTUARY
HAYES, EDWARD J.	VICE-PRESIDENT
HEALY, JR., DONALD J.	ASSISTANT SECRETARY
HOENIG, GERALD J.	VICE-PRESIDENT AND ASSISTANT SECRETARY
HSIANG, HARRY C.	VICE-PRESIDENT
HUEY, WAYNE A.	VICE-PRESIDENT
JENKINS, ROBERT M.	VICE-PRESIDENT
KERRIGAN, WILLIAM D.	VICE-PRESIDENT
LEFF, HAROLD B.	V.P. & OFFICER-IN-CHARGE OF BROKERAGE
LENIHAN, THOMAS E.	VICE-PRESIDENT
LIPSCOMB, JAMES L.	VICE-PRESIDENT AND ASSISTANT SECRETARY
MALCOLM, KENNETH W.	ASSISTANT CONTROLLER

Business Address of all officers :
 One Madison Ave
 New York, NY 10010

DIRECTORS AND OFFICERS LISTING

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COMPANY: METROPOLITAN INSURANCE AND ANNUITY COMPANY
ROLE: OFFICER

Name

Title

MANDEL, RICHARD G.	VICE-PRESIDENT, GEN.CNSL.& ASST. SECY.
MAPLES, DANIEL J.	SPECIAL DESIGNEE
MARE, RONALD	ASSISTANT CONTROLLER
MARKUSSEN, CHRISTINE NELS	VICE-PRESIDENT AND SECRETARY
MASSIMO, JOSEPH	ASSISTANT CONTROLLER
MASUCCI, SALVATORE R.	ASSISTANT VICE-PRESIDENT
MCDERMOTT, THOMAS F.	VICE-PRESIDENT
MCSHANE, CORNELIUS M.	VICE-PRESIDENT
MERCK, ROBERT R.	VICE-PRESIDENT
MILLARD, MATTHEW C.	SPECIAL DESIGNEE
MOE, JEFFREY S.	VICE-PRESIDENT
MOHN, MICHAEL J.	VICE-PRESIDENT
MORGAN, ROBERT W.	VICE-PRESIDENT
MUSEN, ROBERT M.	ACTUARY
NEIDITCH, ALAN M.	VICE-PRESIDENT
POWELL, ROBERT W.	VICE-PRESIDENT
RIPBERGER, WILLIAM R.	VICE-PRESIDENT
ROBIN, ALAN J.	VICE-PRESIDENT AND ASSISTANT SECRETARY
ROGERS, DAVID G.	VICE-PRESIDENT
SCHACHTER, ALEXANDER	BROKERAGE VICE-PRESIDENT
SENEZHAK, DIANA M.	ASSISTANT SECRETARY
SHUMAN, IRA H.	VICE-PRESIDENT
SMITH, STEVEN L.	VICE-PRESIDENT
STUDLEY, PATRICK D.	ACTUARY
TERRY, ROBERT J.	VICE-PRESIDENT
TURNER, VICTOR W.	VICE-PRESIDENT
TYPERMASS, ARTHUR G.	TREASURER
VELTO, WILLIAM J.	ASSISTANT VICE-PRESIDENT
VRANKA, LAWRENCE A.	ASSISTANT VICE-PRESIDENT
WARD, THOMAS E.	VICE-PRESIDENT AND ASSISTANT SECRETARY
WILCOMES, RONALD H.	VICE-PRESIDENT AND ASSISTANT SECRETARY
WILLIAMSON, ANTHONY J.	ASSISTANT TREASURER
YODER, GREGORY J.	VICE-PRESIDENT

Business Address of all officers :

One Madison Ave

New York, NY 10010