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API	PLICAT	ION	FIGURE	A DEPARTME Sendra û	OF STATE	OMPLETI	704 104	Service Control of the	O
DOCUMENT # 845697  1. Corporation Name  JOHN HANCOCK VARIABLE LIFE INSURANCE COMPANY						97 NOV -3 PM 5: 56  SECRETARY OF STATE TALLAHASSEE FLORIDA			
P.O. BOX 717 P.O. BOX BOSTON MA 02117 BOSTON				IANCOCK PLACE IX 717 N MA 02117-0717			6000023392263		
U\$  If above addresses are incorrect in any way, line through incorrect in 2. New Principal Office Address, If Applicable 3. New Mail				nformation and enter correction below.			-11/05/3	97010880 1 <del>,75-****</del> 173	14
<u> </u>			Suite, Apt. #,	etc. Rust (	CALABRARD	4. Date Incorporated or Qualified 13. 13 *** 13. 13 To Do Business in Florida 04/08/1980  5. FEI Number Applied For			
City & State  Zip Country		Čitý & Štate Žip Country		itry	6. CERTIFICATE	04-2664016 of status desired 1	\$8.75 Additional Fe		
7 Nomes	and Stead Ad	tdrannes at Each Officer and/o	r Director (Ele	rida nonprofit corno	rations must list at lea			for a Certificate	of Status
Title(s)	s and Street Addresses of Each Officer and/or Director  Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip		
VCPD	SHAW, HENRY D			3 (Do NOT Use Post Office Box Numbers)  JOHN HANCOCK PLACE			BOSTON MA		
CD	D'ALESSANDRO, DAVID F			JOHN HANCOCK PLACE			BOSTON MA		
8	MANGAN, LAURA L			JOHN HANCOCK PLACE			BOSTON MA		
VD CLEARY, FRANCIS C JR- VD Bocage, Ronald J.			JOHN HANCOCK PLACE			BOSTON MA			
VD	D LUDDY, BARBARA L			JOHN HANCOCK PLACE			BOSTON MA		
T	BASSETT, LEONARD O- Indge, Julie H.			JOHN HANCOCK PLACE			BOSTON MA		
	8. Nen	ne and Address of Current R	egistered Age	nt	Name	9. Name and A	Address of New Regi	stered Agent	
STATE	da state i E capitol e Ihassee fl		PATRIC	DIA A. CAN	CT Co Street Address (P 1200 Suite, Apt. #, Etc. ARIO,	South Pf	n System is Not Acceptable) ne_Island_Ro		
40 1 1-1-		ne registered agent of the above	•	SSISTANT SECR	Plan	tation	01 007 0505 F D	State Zip Code 33324	<del></del>
Signature of Registered		Talva agent of the above	A Co	LUUU ENT MUST SIGN	Williand accept the or			ber 30, 1997	
		oration owes or ha Personal Propert			ear Yes 🗓	No 🔲		other side for information on intangible tax.)	n
this rein	nstatement ap by the corporat	officer or director or the received in the received in the reason for dissolution have been pald and the nature and accurate, and my signature.	ution has been ames of Individ	eliminated, the cor uals listed on this f	porate name satisfies orm do not qualify for a	the requirements an exemption und	of section 607.0401 o	or 617.0401, F.S., that a	ll fees

SIGNATURE AND TYPED ON PRIME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

October 30, 1997 617 572-5060
Date Dayline Phone #

## **OFFICERS & DIRECTORS**

V/D

Lee, Thomas J. John Hancock Place Boston, MA 02117

V/D

Paster, Robert S. John Hancock Place Boston, MA 02117

V/D

Reitano, Robert R. John Hancock Place Boston, MA 02117

V/D

Tomlinson, Joseph A. John Hancock Place Boston, MA 02117

V/D

Van Leer, Michele G. John Hancock Place Boston, MA 02117

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Braun, George H. John Hancock Place Boston, MA 02117

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Brown, Donald N. John Hancock Place Boston, MA 02117

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Davis, Willma H. John Hancock Place Boston, MA 02117

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Dowd, Edward P. John Hancock Place Boston, MA 02117 V

Hodges, James W. John Hancock Place Boston, MA 02117

V

MacLean, Stephen A. John Hancock Place Boston, MA 02117

V

Mannix, William M. John Hancock Place Boston, MA 02117

V

McGuire, Kevin M. John Hancock Place Boston, MA 02117

V

Murdzek, John P. John Hancock Place Boston, MA 02117

V

Nastou, Roger G. John Hancock Place Boston, MA 02117

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O'Donnell, Philip R. John Hancock Place Boston, MA 02117

V

Ouellette, Daniel L. John Hancock Place Boston, MA 02117

V

Shea, John P. John Hancock Place Boston, MA 02117 V Shemin, Barry L. John Hancock Place Boston, MA 02117

V Stapleton, Margaret M. John Hanock Place Boston, MA 02117

V Urick, Anthony C. John Hancock Place Boston, MA 02117

V Welch, Barry E. John Hancock Place Boston, MA 02117

## John Hancock Variable Life Insurance Company

Retail Product Management

John Hancock Place Post Office Box 111 Boston, Massachusetts 02117 Phone: (617) 572-5060 Fax: (617) 572-5775 e-mail: Imangan@jhancock.com

Laura L. Mangan Corporate Secretary John Hancock.

October 30, 1997

Division of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee, FL 32314-6327

Re: John Hancock Variable Life Insurance Company - Revocation of Authority NAIC #90204

FEIN# 04-2664016

Enclosed please find the following documents:

- 1. Application for reinstatement
- 2. A check in the amount of \$173.75, reflecting payment for the application, and handling fee for certificate status
- 3. Copies of original filing, sent to your office on February 6, 1997

Although our filing was sent to your office ahead of the deadline, your notification, advising that the signature of the new registered agent was also required, was never received at our corporate address.

Please mail certificate status to our corporate address, to the attention of Rose Calabraro.

In the future, all correspondence for John Hancock Variable Life Insurance Company should be directed to the attention of Rose Calabraro at our corporate address.

Thank you for your attention,

norate Secretary