

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 845697**

1. Entity Name

JOHN HANCOCK VARIABLE LIFE INSURANCE COMPANY**FILED****Jan 24, 2001 8:00 am**
Secretary of State

01-24-2001 90086 021 ***158.75

Principal Place of Business

**JOHN HANCOCK PLACE
P.O. BOX 717
BOSTON MA 02117**

Mailing Address

**JOHN HANCOCK PLACE
P.O. BOX 717, ATTN: ROSE CALABRARO
BOSTON MA 02117-0717
US**

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 **04-2664016**

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

**CT CORPORATION SYSTEM
1200 SO PINE ISLAND RD
PLANTATION FL 33324**

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, 2001 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	VCPD	<input type="checkbox"/> Delete
NAME	VAN LEER, MICHELE G	
STREET ADDRESS	JOHN HANCOCK PLACE	
CITY-ST-ZIP	BOSTON MA 02117	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	CD	<input type="checkbox"/> Delete
NAME	D'ALESSANDRO, DAVID F	
STREET ADDRESS	JOHN HANCOCK PLACE	
CITY-ST-ZIP	BOSTON MA	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	S	<input type="checkbox"/> Delete
NAME	SCAVONGELLI, PETER	
STREET ADDRESS	JOHN HANCOCK PLACE	
CITY-ST-ZIP	BOSTON MA 02117	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VD	<input type="checkbox"/> Delete
NAME	BOCAGE, RONALD J	
STREET ADDRESS	JOHN HANCOCK PLACE	
CITY-ST-ZIP	BOSTON MA	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VD	<input type="checkbox"/> Delete
NAME	LUDDY, BARBARA L	
STREET ADDRESS	JOHN HANCOCK PLACE	
CITY-ST-ZIP	BOSTON MA	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	T	<input type="checkbox"/> Delete
NAME	INDGE, JULIE H	
STREET ADDRESS	JOHN HANCOCK PLACE	
CITY-ST-ZIP	BOSTON MA	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

*Peter Scavongelli***Peter Scavongelli, Secretary 1-11-01 572-5970**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment
DA 845697
608130

JOHN HANCOCK VARIABLE LIFE INSURANCE COMPANY
OFFICERS & DIRECTORS

V/D
Lee, Thomas J.
John Hancock Place
Boston, MA 02117

V
Engelsen, Todd G.
John Hancock Place
Boston, MA 02117

V/D
Jones, Bruce M.
John Hancock Place
Boston, MA 02117

V/D
Paster, Robert S.
John Hancock Place
Boston, MA 02117

V/D
Strong, Paul J.
John Hancock Place
Boston, MA 02117

V
Alva, Sandeep
John Hancock Place
Boston, MA 02117

V/D
Reitano, Robert R.
John Hancock Place
Boston, MA 02117

V
Blewitt, Stephen J.
John Hancock Place
Boston, MA 02117

V
Davis, Mark W.
John Hancock Place
Boston, MA 02117

V
Peters, Phillip J.
John Hancock Place
Boston, MA 02117

V
Hines, Jr., E. Kendall
John Hancock Place
Boston, MA 02117

V
Felton, Francis X.
John Hancock Place
Boston, MA 02117

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

V
O'Sullivan, Jr., John U.
John Hancock Place
Boston, MA 02117

V
Haahsy, Paul F.
John Hancock Place
Boston, MA 02117

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

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

V
Hartz, Scott S.
John Hancock Place
Boston, MA 02117

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

V
McAneny, Deborah H.
John Hancock Place
Boston, MA 02117

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

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

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

V
Metzler, C. Bruce
John Hancock Place
Boston, MA 02117

V
Vitello, Diane M.
John Hancock Place
Boston, MA 02117

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

V
Ray, Steven Mark
John Hancock Place
Boston, MA 02117