2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2005 8:00 am
Secretary of State
05-02-2005 90413 001 ***150.00

DOCUMENT # 846348

1. Entity Name
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA

66022992

Principal Place of Business	Mailing Address
5701 GOLDEN MILLS DRIVE MINNEAPOLIS, MN 55416-1297	PO BOX 1344 MINNEAPOLIS, MN 55440-1344

01112005 Chg-P CR2E034 (10/03)

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 41-1366075 ☐ 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
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUPPRECHT, GERHARD G 5701 GOLDEN HILLS DRIVE MINNEAPOLIS, MN 55416	☒ Delete	D Jan R Carenli 5701 Golden Hills Dr. Mpls. MN 55416	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS PEPIN, SUZANNE J 5701 GOLDEN HILLS DRIVE MINNEAPOLIS, MN 55416	☐ Delete	D Dennis Dease same	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAMPBELL, JAMES R 5701 GOLDEN HILLS DRIVE MINNEAPOLIS, MN 55416	☐ Delete	D Charles M. Kaitsky same	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WALKER, KEVIN E 5701 GOLDEN HILLS DRIVE MINNEAPOLIS, MN 55416	☐ Delete	D Peter H Uehne Same	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DIEKMANN, MICHAEL 5701 GOLDEN HILLS DRIVE MINNEAPOLIS, MN 55416	☒ Delete	D Mark Zeshaugh same	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC MACDONALD, ROBERT W 5701 GOLDEN HILLS DRIVE MINNEAPOLIS, MN 55416	☐ Delete	D Michael Sullivan same	☐ Change ☒ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Steve Blaske 04/25/05 763-765-6500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Suzanne Pepin 06/07/05 763-765-6500