

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **850956** (4)

1. Corporation Name

JOHN HANCOCK LIFE INSURANCE COMPANY OF AMERICA



Principal Place of Business

Mailing Address

1209 ORANGE STREET
C/O TAX DEPARTMENTS - 26TH FL
WILMINGTON DE 19801
US

P.O. BOX 717
JOHN HANCOCK PLACE, C-2
BOSTON MA 02117-0717
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

INSURANCE COMMISSIONER STATE OF FLORIDA
CAPITAL BUILDING
TALLAHASSEE FL FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 of person authorized to give legal effect to this report

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CPD	<input type="checkbox"/> DELETE
NAME	D'ALESSANDRO, DAVID F	
STREET ADDRESS	JOHN HANCOCK PL	
CITY, ST, ZIP	BOSTON MA	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	SHAW, HENRY D	
STREET ADDRESS	JOHN HANCOCK PL	
CITY, ST, ZIP	BOSTON MA	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CLEARY, FRANCIS C JR	
STREET ADDRESS	JOHN HANCOCK PL	
CITY, ST, ZIP	BOSTON MA	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	REITANO, ROBERT R	
STREET ADDRESS	JOHN HANCOCK PL	
CITY, ST, ZIP	BOSTON MA	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LUDDY, BARBARA L	
STREET ADDRESS	JOHN HANCOCK PL	
CITY, ST, ZIP	BOSTON MA	
TITLE	S	<input type="checkbox"/> DELETE
NAME	MANGAN, LAURA L	
STREET ADDRESS	JOHN HANCOCK PL	
CITY, ST, ZIP	BOSTON MA	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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

Laura L. Mangan, Secretary

Date

Daytime Phone #

CR2E034 (12/95)

OFFICERS & DIRECTORS

T

Bassett, Leonard C.
John Hancock Place
Boston, MA

VD

Lee, Thomas J.
John Hancock Place
Boston, MA

VD

Tomlinson, Joseph A.
John Hancock Place
Boston, MA

VD

Paster, Robert S.
John Hancock Place
Boston, MA

VD

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

V

Ouellette, Daniel L.
John Hancock Place
Boston, MA

V

Braun, George H.
John Hancock Place
Boston, MA

V

Shea, John P.
John Hancock Place
Boston, MA

V

Urick, Anthony C.
John Hancock Place
Boston, MA

V

Davis, Wilma H
John Hancock Place
Boston, MA

V

Stapleton, Margaret M.
John Hancock Place
Boston, MA

V

Coolidge, Nathaniel S.
John Hancock Place
Boston, MA

V

MacLean, Stephen A.
John Hancock Place
Boston, MA

V

Dowd, Edward P.
John Hancock Place
Boston, MA

V

Brown, Donald N.
John Hancock Place
Boston, MA

V

Nastou, Roger G.
John Hancock Place
Boston, MA

V

Hodges, James W.
John Hancock Place
Boston, MA

V

O'Donnell, Phillip R.
John Hancock Place
Boston, MA