

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 850956

1. Corporation Name  
INVESTORS PARTNER LIFE INSURANCE COMPANY

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

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

FILED  
Mar 22, 1999 8:00 am  
Secretary of State

03-22-1999 90057 035 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1981

4. FEI Number

13-3072894

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

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 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, 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 CD ☐ DELETE  
NAME D'ALESSANDRO, DAVID F  
STREET ADDRESS JOHN HANCOCK PL  
CITY-ST-ZIP BOSTON MA 02117

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VCPD ☒ DELETE  
NAME SHAW, HENRY D  
STREET ADDRESS JOHN HANCOCK PL  
CITY-ST-ZIP BOSTON MA 02117

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME PD  
2.3 STREET ADDRESS Black, William A.  
2.4 CITY-ST-ZIP John Hancock Place  
Boston, MA 02117

TITLE S ☐ DELETE  
NAME MANGAN, LAURA L  
STREET ADDRESS JOHN HANCOCK PLACE  
CITY-ST-ZIP BOSTON MA 02117

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE VD ☒ DELETE  
NAME BOCAGE, RONALD J  
STREET ADDRESS JOHN HANCOCK PLACE  
CITY-ST-ZIP BOSTON MA 02117

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME VD  
4.3 STREET ADDRESS Fierro, Marylou G.  
4.4 CITY-ST-ZIP John Hancock Place  
Boston, MA 02117

TITLE VD ☐ DELETE  
NAME LUDDY, BARBARA L  
STREET ADDRESS JOHN HANCOCK PL  
CITY-ST-ZIP BOSTON MA 02117

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE T ☐ DELETE  
NAME INDGE, JULIE H  
STREET ADDRESS JOHN HANCOCK PLACE  
CITY-ST-ZIP BOSTON MA 02117

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED Laura L. Mangan 1/14/99 (617) 572-5060

Date

Daytime Phone #

CR2E034 (11/98)