

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90108 012 ***158.75

DOCUMENT # 850956

1. Entity Name

INVESTORS PARTNER LIFE INSURANCE COMPANY

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **13-3072894**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**INSURANCE COMMISSIONER STATE OF FLORIDA
 CAPITAL BUILDING
 TALLAHASSEE FL FL 32301**

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

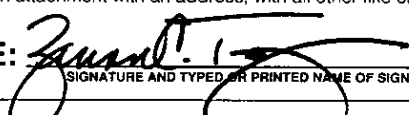
11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD D'ALESSANDRO, DAVID F JOHN HANCOCK PL BOSTON MA 02117 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FORD, MAUREEN R JOHN HANCOCK PL BOSTON MA 02117 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TENCZA, ZENON C JOHN HANCOCK PLACE BOSTON MA 02117 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FIERRO, MARYLOU G JOHN HANCOCK PLACE BOSTON MA 02117 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LUDDY, BARBARA L JOHN HANCOCK PL BOSTON MA 02117 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T INDGE, JULIE H JOHN HANCOCK PLACE BOSTON MA 02117 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:



Zenon C. Tencza 1-11-01 (617) 375-4891

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

UN40/SE

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906 935
850950

INVESTORS PARTNER LIFE INSURANCE COMPANY OFFICERS & DIRECTORS

V/D
Moloney, Thomas E.
John Hancock Place
Boston, MA 02117

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

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

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

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

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

V/D
Bocage, Ronald J.
John Hancock Place
Boston, MA 02117

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

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

V
Steven M. Ray
John Hancock Place
Boston, MA 02117

V
Stapleton, Margaret M.
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
Cahill, Rose Mrazek
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
Alva, Sandeep
John Hancock Place
Boston, MA 02117

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

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

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

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

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

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