

F03000003006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Name
Availability

Document
Examiner

DCC

Updater

Office Use Only

Updater
Verifier

DCC

Acknowledgement

DCC

W. P. Verifier

DCC



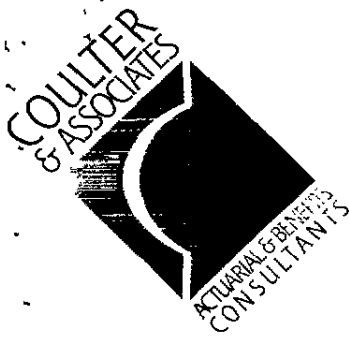
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04/07/03--01097--003 **70.00

03 JUN 17 AM 8:30
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED

Cert
Wrong Cert.



April 4, 2003

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: CoA Applications – Massachusetts and New Jersey

To Whom It May Concern:

On behalf of Westward Life Insurance Company of Phoenix, Arizona, we are herewith submitting the Company's "Application By Foreign Corporation for Authorization to Transact Business in Florida." It is our understand that this application must be made and approved prior to the Company's planned application for admission as a foreign insurer.

We are also enclosing a fee check (2338) in the amount of \$70.00 and a copy of the Company's letter of authorization for Coulter & Associates, Inc.

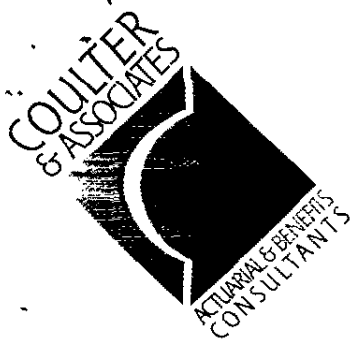
Please send the letter of acknowledgement to us at Coulter & Associates. You may also direct any questions to us as the Company's authorized representative.

Sincerely,

Frank D. Cripps, Contract & Compliance Consultant
Phone: (609) 443-7540
Fax: (609) 443-4103
Email: frank@coulter-and-associates.com

FDC/c
Enclosures

FILED
03 JUN 17 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



April 16, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

ATTN: Ms. Diane Cushing
Corporate Specialist

RE: Westward Life Insurance Company
Ref. Number: W03000009863
Your Correspondence of April 8, 2003 (copy enclosed)

Dear Ms. Cushing:

Thank you for your referenced correspondence.

We have contacted the Arizona Insurance Department concerning your request and they have provided us with their form E140 (02/03). We are enclosing this form in response to your request for a certificate of existence or good standing from the Company's domicile state.

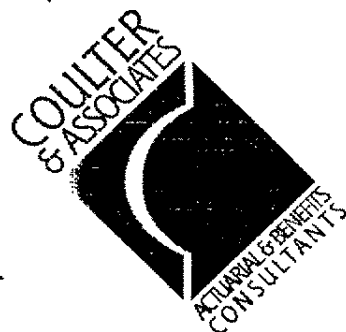
Please let us know if you have any questions or require any additional information.

Sincerely,

Frank D. Cripps, Contract & Compliance Consultant
Phone: (609) 443-7540
Fax: (609) 443-4103
Email: frank@coulter-and-associates.com

FDC/c
Enclosures

379 Princeton-Hightstown Rd.
Suite 15
Cranbury, NJ 08512
Phone: 609-443-4140
Fax: 609-443-4103



Frank D. Cripps
Contract & Compliance Consultant

379 Princeton-Hightstown Rd.
Cranbury, NJ 08512
Phone: 609-443-7540
Fax: 609-443-4103

June 6, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

ATTN: Ms. Diane Cushing
Corporate Specialist

RE: Westward Life Insurance Company
Ref. Number: W03000009863
Your Correspondence of April 21, 2003 (copy enclosed)

Dear Ms. Cushing:

Thank you for your referenced correspondence.

Enclosed please find a certificate of existence from the Arizona Corporation Commission.

We trust this document will satisfy your requirement of a "certificate of existence" as requested in your April 21st correspondence.

Please let us know if you have any questions or require any additional information.

Sincerely,

Frank D. Cripps, Contract & Compliance Consultant
Phone: (609) 443-7540
Fax: (609) 443-4103
Email: frank@coulter-and-associates.com

FDC/c
Enclosures



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 8, 2003

FRANK D. CRIPPS
COULTER AND ASSOCIATES
379 PRINCETON-HIGHTSTOWN RD, STE 15
CRANBURY, NJ 08512

SUBJECT: WESTWARD LIFE INSURANCE COMPANY
Ref. Number: W03000009863

We have received your document for WESTWARD LIFE INSURANCE COMPANY and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 303A00020818



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 21, 2003

FRANK D. CRIPPS
COULTER AND ASSOCIATES
379 PRINCETON-HIGHTSTOWN RD, STE 15
CRANBURY, NJ 08512

SUBJECT: WESTWARD LIFE INSURANCE COMPANY
Ref. Number: W03000009863

We have received your document for WESTWARD LIFE INSURANCE COMPANY and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The Certificate must come from the Secretary of States office not the Dept of Insurance.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 703A00023997

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Westward Life Insurance Company
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Arizona 3. 86-0201136
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. September 24, 1965 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification.
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 2929 N. 44th Street, #120, Phoenix, AZ 85018
(Principal office address)
P.O. Box 6025 (4040 Paramount Blvd), Lakewood, CA 90712
(Current mailing address)
8. Life and health insurance.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: Commissioner of Insurance
Office Address: 200 E. Gaines Street
Tallahassee, Florida 32399-0328
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
03 JUN 17 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: James H. Smith

Address: 4040 Paramount Blvd., P. O. Box 6025

Lakewood, CA 90714-6025

Vice Chairman: Jan E. Vickers

Address: 4040 Paramount Blvd., P. O. Box 6025

Lakewood, CA 90714-6025

Director: Frank J. Cordon

Address: 18722 Rosita Street

Tarzana, CA 91356

Director: Dennis Y. Fujioka

Address: 4040 Paramount Blvd., P. O. Box 6025

Lakewood, CA 90714-6025

B. OFFICERS

President: James H. Smith

Address: 4040 Paramount Blvd., P. O. Box 6025

Lakewood, CA 90714-6025

Vice President: Frank J. Cordon

Address: 18722 Rosita Street

Tarzana, CA 91356

Secretary: Jan E. Vickers

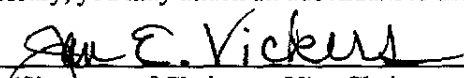
Address: 4040 Paramount Blvd., P. O. Box 6025, Lakewood, CA 90714-6025

Treasurer: Dennis Y. Fujioka

Address: 4040 Paramount Blvd., P. O. Box 6025, Lakewood, CA 90714-6025

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

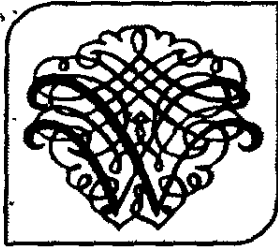

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Jan E. Vickers, Vice Chairman and Secretary

(Typed or printed name and capacity of person signing application)

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03 JUN 17 AM 8:30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE



NAIC # 78301

WESTWARD LIFE INSURANCE COMPANY

Executive Office: • P.O. Box 6025 • Lakewood, California 90714-6025 • (562) 420-6103

ADDENDUM TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Names and business addresses of officers and/or directors:

A. DIRECTORS, Continued. . .

Director: Robert C. Johnson

Address: 4040 Paramount Blvd., P. O. Box 6025

Lakewood, CA 90714-6025

Director: Kaoru D. Yoshioka

Address: 22212 Camay Court

Calabasas, CA 91305

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JUN 17 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. OFFICERS, Continued. . .

Vice President: Kaoru D. Yoshioka

Address: 22212 Camay Court

Calabasas, CA 91305

STATE OF ARIZONA



Office of the CORPORATION COMMISSION

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETING:

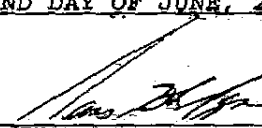
I, JAMES G. JAYNE, INTERIM EXECUTIVE SECRETARY OF THE ARIZONA CORPORATION COMMISSION, DO HEREBY CERTIFY THAT THE RECORDS IN THIS OFFICE SHOW THAT

WESTWARD LIFE INSURANCE COMPANY

AN ARIZONA CORPORATION, DID ON THE 24TH DAY OF SEPTEMBER 1965 FILE ARTICLES OF INCORPORATION AS A NON-FILING INSURANCE COMPANY.



IN WITNESS WHEREOF, I have hereunto
set my hand and affixed the official
seal of the Arizona Corporation
Commission. Done at Phoenix, the Capital,
this 2ND DAY OF JUNE, 2003 A.D.


INTERIM EXECUTIVE SECRETARY

BY 