2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002104

Entity Name: ING NORTH AMERICA INSURANCE CORPORATION

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
5780 POWERS PERRY NW ATLANTA, GA 30327						
Current Mailing Address:				New Mailing Address:		
5780 POWERS FERRY RD NW ATLANTA, GA 30327				20 WASHINGTON AVENUE SOUTH ROUTE 1226 MINNEAPOLIS, MN 55401		
FEI Number:	52-1317217	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address o	f New Registered Agent:
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
The above in the State		submits this statement for the pur	rpose of	f changing it	s registered	d office or registered agent, or both,
SIGNATURE:						
		ic Signature of Registered Agen	ıt			Date
Election Cam	paign Financing	g Trust Fund Contribution ().				
OFFICERS	AND DIREC	TORS:		ADDITIONS	S/CHANGE	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () HEALY, BRIDG 230 PARK AVE NEW YORK, N	NUE		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	PD () MCINERNEY, T ONE ORANGE ' WINDSOR, CT	WAY		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D () WHEAT, DAVID 5780 POWERS ATLANTA, GA	FERRY NW		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	CEO () MCINERNEY, T ONE ORANGE ' WINDSOR, CT	WAY		Title: Name: Address: City-St-Zip:		(X) Change () Addition DY M GTON AVENUE SOUTH LIS, MN 55401
Title: Name: Address: City-St-Zip:	T () PENDERGRAS 5780 POWERS ATLANTA, GA	FERRY NW		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	S () BENNER, JOY 20 WASHINGTO MINNEAPOLIS,	ON AVE S		Title: Name: Address: City-St-Zip:		(X) Change () Addition IDALL K GTON AVE S LIS, MN 55401

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDALL K. PRICE AS 04/22/2009