

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90300 006 \*\*\*150.00

**DOCUMENT # F94000002435**

1. Entity Name

**AMERICAN GENERAL LIFE INSURANCE COMPANY OF PENNS  
 YLVANIA**

Principal Place of Business

**3600 ROUTE 66  
 P.O. BOX 1580  
 NEPTUNE NJ 07754-1580  
 US**

Mailing Address

**3600 ROUTE 66  
 P.O. BOX 1580  
 NEPTUNE NJ 07754-1580  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**23-1615213**

Applied For

Not Applicable

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  
 THE CAPITOL  
 TALLAHASSEE FL 32399**

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, 2002 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STANKO, RICHARD E 3854 MOULIN LANE HOFFMAN ESTATES IL 60195	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO KEELER, WILLIAM M 670 LITTLE SILVER POINT ROAD LITTLE SILVER NJ 07739	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CURCURU, FELIX 1542 OSPREY COURT MANASQUAN NJ 08736	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BEDNARSKI, WALTER E 153 FORDHAM DRIVE ABERDEEN NJ 07747	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD THOME, ALFRED N 107 CARMEL CIRCLE HOLMDEL NJ 07733	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LEARY, WILLIAM J 507 LAKESHORE DRIVE NORTH BARRINGTON IL 60010	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V One Woodfield Rd Schaumburg, IL 60173	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/CEO/D 3600 Route 66 Neptune, NJ 07754-1580	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3600 Route 66 Neptune, NJ 07754-1580	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3600 Route 66 Neptune, NJ 07754-1580	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V One Woodfield Rd Schaumburg, IL 60173	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V 3600 Route 66 Neptune, NJ 07754-1580	<input checked="" 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: Walter E. Bednarski**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/24/02**

Date

**(732) 922-7415**

Daytime Phone #

CR2E034 (9/01)

Attachment # F9400000 2435

<b>American General Life Insurance Company of Pennsylvania</b>	
<i>Attachment to 2002 Florida Uniform Business Report</i>	
<b>Officers</b>	<b>Directors</b>
<b>Wayne A. Barnard</b> 2727 Allen Parkway Houston, TX 77019	<b>Rodney O. Martin (Chairman)</b> 2929 Allen Parkway Houston, TX 77019
<b>Robert M. Beuerlein</b> 2727 Allen Parkway Houston, TX 77019	<b>Robinson K. Nottingham</b> 600 King Street Wilmington, DE 19801
<b>Phillip L. Chapman</b> 3600 Route 66 Neptune, NJ 07754	<b>Nicholas A. O'Kulich</b> 70 Pine Street New York, NY 10270
<b>Pauletta P. Cohn</b> 2929 Allen Parkway Houston, TX 77019	
<b>Larry A. Compton</b> One Woodfield Road Schaumburg, IL 60173	
<b>Robert F. Herbert, Jr.*</b> 2727 Allen Parkway Houston, TX 77019	
<b>David L. Herzog*</b> 2929 Allen Parkway Houston, TX 77019	
<b>Kyle L. Jennings</b> 2929 Allen Parkway Houston, TX 77019	
<b>Randy J. Marash*</b> 3600 Route 66 Neptune, NJ 07754	
<b>Paul L. Mistretta</b> 2929 Allen Parkway Houston, TX 77019	
<b>Gary D. Reddick*</b> 2929 Allen Parkway Houston, TX 77019	
<b>Edward M. Schmauder</b> 3600 Route 66 Neptune, NJ 07754	
<b>Elizabeth M. Tuck</b> <b>(Secretary)</b> 70 Pine Street New York, NY 10270	

\*Also are Directors