

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004980

FILED
Mar 01, 2011
Secretary of State

Entity Name: PHL VARIABLE INSURANCE COMPANY

Current Principal Place of Business:

ONE AMERICAN ROW
HARTFORD, CT 061025056

New Principal Place of Business:

Current Mailing Address:

ONE AMERICAN ROW
HARTFORD, CT 061025056

New Mailing Address:

FEI Number: 06-1045829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 323990000 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: POLKINGHORN, PHILIP K
Address: ONE AMERICAN ROW
City-St-Zip: HARTFORD, CT 061025056 US

Title: VP,S
Name: BEERS, JOHN H
Address: ONE AMERICAN ROW
City-St-Zip: HARTFORD, CT 061025056 US

Title: CFOT
Name: HOFMANN, PETER A
Address: ONE AMERICAN ROW
City-St-Zip: HARTFORD, CT 061025056 US

Title: DCIO
Name: WILKOS, CHRISTOPHER M
Address: ONE AMERICAN ROW
City-St-Zip: HARTFORD, CT 061025056

Title: D
Name: CASSIDY, EDWARD W
Address: ONE AMERICAN ROW
City-St-Zip: HARTFORD, CT 061025056

Title: P
Name: WEHR, JAMES D
Address: ONE AMERICAN ROW
City-St-Zip: HARTFORD, CT 061025056

I hereby 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 all other like empowered.

SIGNATURE: JOHN H. BEERS

VP,S

03/01/2011

Electronic Signature of Signing Officer or Director

Date