

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90051 034 ***150.00

0618192 AT

DOCUMENT # F96000004412

1. Entity Name

**SBLI USA FINANCIAL SERVICES LIFE INSURANCE COMPA
 NY, INC.**

Principal Place of Business

Mailing Address

**3225 NORTH CENTRAL AVE
 SUITE 1601
 PHOENIX AZ 85012**

**P.O. BOX 1050
 NEWARK NJ 07102**

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

13-4144857

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
 CAPITOL
 TALLAHASSEE FL 32399-0300**

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]*

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 **PCD** ☐ Delete
 NAME **PRYOR, VIKKI L**
 STREET ADDRESS **C/O SBLI USA 460 W 34TH STR, STE 800**
 CITY-ST-ZIP **NEW YORK NY 10001**

TITLE ☐ Change ☐ Addition
 NAME *Please see attachment*
 STREET ADDRESS *for complete titles and additions.*
 CITY-ST-ZIP

TITLE **EVD** ☐ Delete
 NAME **MCINTOSH, DENNIS M**
 STREET ADDRESS **C/O SBLI USA 460 W 34TH STR, STE 800**
 CITY-ST-ZIP **NEW YORK NY 10001**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **EVD** ☐ Delete
 NAME **TUCKER, KERRY Y**
 STREET ADDRESS **C/O SBLI USA 460 W 34TH STR, STE 800**
 CITY-ST-ZIP **NEW YORK NY 10001**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **EVD** ☐ Delete
 NAME **WALSH, DAVID J**
 STREET ADDRESS **C/O SBLI USA 460 W 34TH STR, STE 800**
 CITY-ST-ZIP **NEW YORK NY 10001**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **EVD** ☐ Delete
 NAME **ALI, M. NASIM**
 STREET ADDRESS **C/O SBLI USA 460 W 34TH STR, STE 800**
 CITY-ST-ZIP **NEW YORK NY 10001**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SV** ☐ Delete
 NAME **MEOLA, RALPH**
 STREET ADDRESS **C/O SBLI USA 460 W 34TH STR, STE 800**
 CITY-ST-ZIP **NEW YORK NY 10001**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/15/02 212-356-0336

CR2E034 (9/01)

Attachment
#F960000004412

80035017

Directors & Officers
of
SBLI USA Financial Services Life Insurance Company, Inc.

Name	Title
Vikki L. Pryor	Director President & Chief Executive Officer
Dennis M. W. McIntosh	Director Executive Vice President, Chief Financial Officer & Treasurer
M. Nasim Ali	Director Executive Vice President – Sales & Marketing
Kerry Y. Tucker	Director Executive Vice President, Administration and Assistant Secretary
David J. Walsh	Director Executive Vice President, General Counsel and Secretary
Ralph Meola	Senior Vice President & Chief Actuary
Armen G. Bodossian	Vice President & Controller