

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00100

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** AGL LIFE ASSURANCE COMPANY

**Current Principal Place of Business:**

610 W. GERMANTOWN PIKE, SUITE 460  
PLYMOUTH MEETING, PA 19462 US

**New Principal Place of Business:**

**Current Mailing Address:**

610 W. GERMANTOWN PIKE, SUITE 460  
PLYMOUTH MEETING, PA 19462 US

**New Mailing Address:**

**FEI Number:** 52-0795747

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
THE CAPITOL BLDG.  
TALLAHASSEE, FL 32399 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PDCE  
Name: HILLMAN, JOHN K  
Address: 610 W GERMANTOWN PK STE 460  
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: D  
Name: POLKINGHORN, PHILIP K  
Address: ONE AMERICAN ROW  
City-St-Zip: HARTFORD, CT 06102

Title: DV  
Name: FISCHER, JOHN  
Address: 610 W GERMANTOWN PK STE 460  
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: VT  
Name: KEIM, KENT  
Address: 610 W GERMANTOWN PK STE 460  
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: VS  
Name: OBERLIES, SUSAN M  
Address: 610 W. GERMANTOWN PLACE, SUITE 460  
City-St-Zip: PLYMOUTH MEETING, PA 19462

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 HILLMAN

PDCE

01/06/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date