## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P00407

14. I hereby certify that the information supplied with this filing does not qualify indicated on this annual report or supplemental annual report is true and officer or director of the corporation or the receiver or trustee erpowers.

Block 12 or Block 13 if changed, or on an attachment wit

(7)

THE MERCANTILE AND GENERAL LIFE REASSURANCE COMPANY OF AMERICA

Principal Place of Business

Mailing Address

FILED Mar 02 1998 8:00am Secretary of State



	161 BAY. ST CANADA TRUST TOWER NATARIO M5J 2T6	SUITE 3000, 161 BAY, ST TORONTO, ONATARIO M CANADA		TRUS	TOWER	DO NOT WRITE IN THIS  3. Date incorporated or Qualified  12/28/1983	SPACE		
2. Principal Pl	2. Principal Place of Business 2a. Mailing Add			ress		4. FEI Number	Ap	plied For	
21		26				13-3126819	No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22		27				a, Certificate of Status Desired	Fee Re	equired	
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Country			8. This corporation owes or has paid the ci		_ ~	
24	25 29 30				Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
THE INSURANCE COMMISSIONER OF FLORIDA				81 Name					
TH	e Capitol Bldg.		82 Street Add		reet Addre	ss (P.O. Box Number is Not Acceptable)			
TAI	LLAHASSEE FL 32301		L						
			,	13					
			1	<b>4</b> C	ity	FI	<b>85</b> Zip	Code	
11. Pursuant to office or reagent. La	o the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligat	and 607.1508, Florida Statute f Florida. Such change was a ions of, Section 607.0505, Flo	es, the abo authorized orida Statu	ove-na by the tes.	med corpo corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing it pointment as	s registered registered	
SIGNATURE									
	Signature, typed or printed name of registered agent			Agent siç	nature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	S IN 12	
TITLE	OFFICERS AND	DIRECTORS DELETE	13.	:	PD	ADDITIONS/CHANGES TO OFFICERS AN	Change	X Addition	
	PATTERSON, PETER BRIAN	the becare	1,2 NAM			, KIN KEUNG			
NAME	161 BAY STREET SUITE 3000					East 52nd Street, 39th Floor			
STREET ADDRESS	TORONTO, CANADA			ET ADDI	110.0	York, NY 10055			
CITY-ST-ZIP	TONORIO, CARADA	<b>™</b> DELETE		-ST-ZIF			Change	X Addition	
TITLE	CASTELLINO, JOHN VINCENT			2.1 TITLE		LFEILD-BROWNE, GEORGE WILLIAM	CT cuanão	LES PROGRO	
NAME	•		2.2 NAM		0	te 3000, Canada Trust Tower, 1	61 Bay St	reet	
STREET ADDRESS	161 BAY STREET SUITE 3000		2.3 STR		""   Toro	onto, Ontario, Canada M5J 2T6	52 5a, 50		
CITY-ST-ZIP	TORONTO, CANADA	T priette	2. 4 CIT		<del>}</del>		Change	Addition	
TITLE	BOOTT W.C.	☐ DELETE	3.1 TITL				CI CHAILAG		
NAME	SCOTT, K. G		3.2 NAM						
STREET ADDRESS	161 BAY STREET STE 3000		3.3 STR						
CITY-ST-ZIP	TORONTO, CANADA	XX DELETE	3.4. CIT		<del></del>		Change	Addition	
TITLE	I I EKOLH MALVIT O	KX DELETE			GODI	BEHERE, ANN FRANCES	C Ollarige	L. AUGINOII	
NAME	LEIGHL, MALKIT S		4. 2 NAI		Sufi	te 3000, Canada Trust Tower, 1	61 Bay St	reet	
STREET ADDRESS	161 BAY ST., STE. 30000		4.3 STR		HESS Toro	onto, Ontario, Canada M5J 2T6	•		
CITY-ST-ZIP	TORONTO CANADA	VV DELETE	4.4 CITY				Change	x Addition	
TITLE	C MADDIO MINIMANA BOMA EC	<b>KX</b> DELETE	5.1 TITL		C	T, JEFF RODERICK	□ cuange	LAJ AUGULUII	
NAME	HARRIS, WILLIAM BOWLES		5.2 NAM		55 1	East 52nd Street, 39th Floor			
STREET ADDRESS	161 BAY STREET SUITE 3000		5.3 STR		IESS New	York, NY 10055			
CITY-ST-ZIP	TORONTO, CANADA	Druste	5.4 CITY			1 4** 4 * 4* * 1 1 1 1 1 1 1 1 1 1 1 1 1	ILTI Change	X Addition	
TITLE		☐ DELETE	6.1 TITL		D	-03/03/98010080	ובארון (Change	\Lambda \text{Anonion}	
NAME			62 NAM		1000	SMORE, SENION GRIFFITH	(	YS !	
STREET ADDRESS			6.3 STR	ET ADDE		Park Avenue York, NY 10017		2.2	
CITY-ST-ZIP			6.4 CITY	-ST-ZIF	,   ''''	total ne room		<b>9</b> .0	

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for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information source and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in