

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03403

FILED
Apr 05, 2012
Secretary of State

Entity Name: INTRAMERICA LIFE INSURANCE COMPANY

Current Principal Place of Business:

100 MOTOR PARKWAY
SUITE 132
HAUPPAUGE, NY 11788 US

New Principal Place of Business:

Current Mailing Address:

100 MOTOR PARKWAY
SUITE 132
HAUPPAUGE, NY 11788 US

New Mailing Address:

FEI Number: 13-2556978

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: PR
Name: WINTER, MATTHEW E
Address: 3100 SANDERS RD
City-St-Zip: NORTHBROOK, IL 60062

Title: SEC
Name: LEES, SUSAN L
Address: 3100 SANDERS ROAD
City-St-Zip: NORTHBROOK, IL 60062

Title: TR
Name: RIZZO, MARIO
Address: 3075 SANDERS ROAD
City-St-Zip: NORTHBROOK, IL 60062

Title: SGVP
Name: PILCH, SAMUEL H
Address: 3075 SANDERS ROAD
City-St-Zip: NORTHBROOK, IL 60062

Title: DR
Name: BECKER, ROBERT K
Address: 3100 SANDERS ROAD
City-St-Zip: NORTHBROOK, IL 60062

Title: DR
Name: PINTOZZI, JOHN C
Address: 3100 SANDERS ROAD, M5A
City-St-Zip: NORTHBROOK, IL 60062

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: LYNN CIRINCIONE

AR

04/05/2012

Electronic Signature of Signing Officer or Director

Date