2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06829

FILED Apr 10, 2012 Secretary of State

Entity Name: MONITOR LIFE INSURANCE COMPANY OF NEW YORK

Current Principal Place of Business: New Principal Place of Business:

5772 I-55 N FRONTAGE RD JACKSON, MS 39211 US

Current Mailing Address: New Mailing Address:

P.O. BOX 16708

JACKSON, MS 39236 US

FEI Number: 16-0986348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C T CORPORATION SYSTEM C/O C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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.

III the State of Florid

SIGNATURE: Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title:

Name: TREVVETT, PAUL H
Address: 392 PARDEEVILLE RD
City-St-Zip: COLD BROOK, NY US

Title: DP

Name: WHITE, DAVID R

Address: 6040 I-55 N.FRONTAGE RD City-St-Zip: JACKSON, MS 39211 US

Title: DVP

Name: MORGAN, JOHN J

Address: 6040 I-55 N. FRONTAGE RD City-St-Zip: JACKSON, MS 39211 US

Title: DST

Name: EATON, RICHARD L

Address: 6040 I-55 N. FRONTAGE RD City-St-Zip: JACKSON, MS 39211 US

Title: DVF

Name: EATON, RYAN L

Address: 6040 I-55 N. FRONTAGE RD City-St-Zip: JACKSON, MS 39211 US

Title: DVP

Name: PEETS, JASON A

Address: 6040 I-55 N. FRONTAGE RD City-St-Zip: JACKSON, MS 39211 US

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: RICHARD L. EATON SEC 04/10/2012