2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816075

Entity Name: STANDARD SECURITY LIFE INSURANCE COMPANY OF NEW

YORK

Current Principal Place of Business:

485 MADISON AVENUE, 14TH FLOOR

NEW YORK, NY 10022

Current Mailing Address:

485 MADISON AVENUE, 14TH FLOOR

NEW YORK, NY 10022 US

FEI Number: 13-5679267 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD 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.

SIGNATURE: CT COPROATION SYSTEM

03/31/2016

FILED Mar 31, 2016

Secretary of State

CC1092127604

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

TitlePRESIDENT, DIRECTORTitleASST. SECRETARYNameKETTIG, DAVID T.NameGALANTE, ALISON

Address 485 MADISON AVENUE, 14TH FLOOR Address 485 MADISON AVENUE, 14TH FLOOR

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

TitleCFO, DIRECTORTitleSECRETARYNameBALZOFIORE, GARY J.NameNISSER, LOAN

Address 485 MADISON AVENUE, 14TH FLOOR Address 485 MADISON AVENUE, 14TH FLOOR

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title DIRECTOR Title DIRECTOR

Name THUNG, ROY T. K. Name TATUM, JAMES G.

Address 485 MADISON AVENUE, 14TH FLOOR Address 485 MADISON AVENUE, 14TH FLOOR

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title DIRECTOR Title DIRECTOR

Name LIPARI, RACHEL Name LEOPOLD, ROBERT M.

Address 485 MADISON AVENUE, 14TH FLOOR Address 485 MADISON AVENUE, 14TH FLOOR

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

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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: ALISON GALANTE

ASSISTANT SECRETARY

03/31/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name LAPIN, STEVEN B. Name LAHEY, JOHN L.

Address 485 MADISON AVENUE, 14TH FLOOR Address 485 MADISON AVENUE, 14TH FLOOR

City-State-Zip: NEW YORK NY 10022 City-State-Zip: NEW YORK NY 10022

Title DIRECTOR Title DIRECTOR

Name GRABER, LARRY R. Name EICHWALD, BERNARD

Address 12007 RESEARCH BLVD., STE. 201 Address 485 MADISON AVENUE, 14TH FLOOR

City-State-Zip: AUSTIN TX 78759 City-State-Zip: NEW YORK NY 10022