

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003123

Entity Name: PRUDENTIAL ANNUNITIES DISTRIBUTORS, INC.**Current Principal Place of Business:**ONE CORPORATE DRIVE
SHELTON, CT 06484**Current Mailing Address:**ONE CORPORATE DRIVE
SHELTON, CT 06484 US**FEI Number:** 06-1212909**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name ALLAIN, RODNEY R
Address ONE CORPORATE DRIVE
City-State-Zip: SHELTON CT 06484

Title TREASURER
Name MARIN, ELIZABETH
Address 751 BROAD ST
21ST FLOOR, PLAZA
City-State-Zip: NEWARK NJ 071023714

Title DIRECTOR
Name BRANCH, RODNEY
Address 1 CORPORATE DR
City-State-Zip: SHELTON CT 064846208

Title DIRECTOR
Name FRIAS, YANELA C
Address 213 WASHINGTON ST
WASH
City-State-Zip: NEWARK NJ 071022917

Title SECRETARY
Name HOFFMAN, RICHARD J
Address 213 WASHINGTON ST
WASH
City-State-Zip: NEWARK NJ 071022917

Title ASST. SECRETARY
Name O'HARA, MARY T
Address 1 CORPORATE DRIVE
1 CORPORATE DR
City-State-Zip: SHELTON CT 064846208

Title DIRECTOR
Name CHOPUS, WAYNE
Address 1 CORPORATE DRIVE
1 CORPORATE DR
City-State-Zip: SHELTON CT 064846208

Title DIRECTOR
Name MARENAKOS, STEVEN P
Address 1 CORPORATE DRIVE
1 CORPORATE DR
City-State-Zip: SHELTON CT 064846208

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: MARY T O'HARA**ASST. SECRETARY****04/27/2016**

Electronic Signature of Signing Officer/Director Detail

Date