

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34145

Entity Name: AXA INSURANCE COMPANY**Current Principal Place of Business:**125 BROAD STREET
NEW YORK, NY 10004**Current Mailing Address:**125 BROAD STREET
NEW YORK, NY 10004 US**FEI Number:** 13-3594502**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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 PD, CEO
Name SCHERER, ALEXANDRE
Address 125 BROAD STREET
City-State-Zip: NEW YORK NY 10004

Title VP, COO, DIRECTOR
Name HILBRECHT, CHRISTIAN
Address 125 BROAD STREET
City-State-Zip: NEW YORK NY 10004

Title TREASURER
Name WOLF, ROBERT
Address 125 BROAD STREET
City-State-Zip: NEW YORK NY 10004

Title SECRETARY
Name GROSS, LINDA
Address 125 BROAD STREET
City-State-Zip: NEW YORK NY 10004

Title VP
Name DECLIDE, MONIQUE
Address 125 BROAD STREET
City-State-Zip: NEW YORK NY 10004

Title DIRECTOR, CHAIRMAN
Name ROCARD, PHILIPPE
Address 2-4 RUE JULES LEFEBVRE
City-State-Zip: PARIS 75009

Title DIRECTOR
Name FISCHER, CHRISTIANE
Address 3 WEST 35TH STREET
City-State-Zip: NEW YORK NY 10001

Title DIRECTOR
Name GOLDBERG, STEVEN
Address 4024 GREENTREE DRIVE
City-State-Zip: OCEANSIDE NY 11572

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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: LINDA GROSS**CORPORATE
SECRETARY**

01/22/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KNAUS, PETER
Address COLONIA-ALLEE 10-20
City-State-Zip: KOLN 51067

Title DIRECTOR
Name FERNANDEZ, ARMAND
Address 3130 SOUTH TECH BOULEVARD
City-State-Zip: MIAMISBURG OH 45342

Title VP
Name IVALIOTIS, JOHN
Address 125 BROAD STREET
City-State-Zip: NEW YORK NY 10004

Title VP
Name CLARKE, CARLTON
Address 125 BROAD STREET, 5TH FLOOR
City-State-Zip: NEW YORK NY 10004

Title DIRECTOR
Name KUKLINSKI, KAI
Address COLONIA-ALLEE 10-20
City-State-Zip: COLOGNE 51067

Title DIRECTOR
Name VAN HECKE, GUY
Address 9 AVENUE DE MESSINE
City-State-Zip: PARIS 75008

Title VP
Name ULMER, EILEEN
Address 125 BROAD STREET
City-State-Zip: NEW YORK NY 10004

Title VP
Name ROSA, FRAN
Address 125 BROAD STREET, 5TH FLOOR
City-State-Zip: NEW YORK NY 10004

Title VP
Name FITZGERALD, SUSAN
Address 125 BROAD STREET, 5TH FLOOR
City-State-Zip: NEW YORK NY 10004

Title DIRECTOR
Name LUKER, WALTER
Address 4860 EAMMONS ROAD
City-State-Zip: OREGONIA OH 45054