

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 846539

FILED
Jul 07, 2008
Secretary of State

Entity Name: ANNUITY & LIFE REASSURANCE AMERICA, INC.

Current Principal Place of Business:

124 PALISADO AVE.
WINDSOR, CT 06095 US

New Principal Place of Business:

3/O ROBINSON & COLE LLP
280 TRUMBULL STREET
HARTFORD, CT 06103 US

Current Mailing Address:

124 PALISADO AVE.
WINDSOR, CT 06095 US

New Mailing Address:

1805 MONUMENT AVENUE
SUITE 201
RICHMOND, VA 23220 US

FEI Number: 41-0880965

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: MAWDSLEY, WILLIAM
Address: 304 INTL CTR 26
City-St-Zip: HAMILTON,BERMUDA, HM12

Title: P () Delete
Name: LOCKWOOD, JOHN W
Address: 124 PALISADO AVE.
City-St-Zip: WINDSOR, CT 06095

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: WALKER, PHILIP G CEO
Address: 1805 MONUMENT AVENUE, SUITE 201
City-St-Zip: RICHMOND, VA 23220

Title: O (X) Change () Addition
Name: FESTOG, CHRIS VP, FIN
Address: 1805 MONUMENT AVENUE, SUITE 201
City-St-Zip: RICHMOND, VA 23220

Title: O () Change (X) Addition
Name: ROPER, JULIA PRES
Address: 500 LAKE COOK ROAD, SUITE 350
City-St-Zip: DEERFIELD, IL 60015

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHRIS FESTOG

VP

07/07/2008

Electronic Signature of Signing Officer or Director

Date