

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Aug 24, 2007 8:00 am**  
**Secretary of State**

2

08-24-2007 90025 014 \*\*\*558.75

**DOCUMENT # 814485**

1. Entity Name  
**O M FINANCIAL LIFE INSURANCE COMPANY**



Principal Place of Business      Mailing Address  
**1001 FLEET STREET**      **1001 FLEET STREET**  
**BALTIMORE, MD 21202 US**      **BALTIMORE, MD 21202 US**

40130175



2. Principal Place of Business - No P.O. Box #      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

07062007      Chg-P      CR2E034 (12/06)

City & State      City & State

Zip      Country      Zip      Country

4. FEI Number  
**52-6033321**

Applied For  
 Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>CHIEF FINANCIAL OFFICER</b> <b>P O BOX 6200 (32314-6200)</b> <b>200 E. GAINES ST</b> <b>TALLAHASSEE, FL 32399-0000</b>		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution.       **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	DC	<input checked="" type="checkbox"/> Delete		TITLE	SVP; Chief Investment Officer	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	BARKER, GUY V			NAME	Jeffrey J. Lobo		
STREET ADDRESS	1001 FLEET ST 7TH FLOOR			STREET ADDRESS	1001 Fleet St; 7th Floor		
CITY-ST-ZIP	BALTIMORE, MD 21202			CITY-ST-ZIP	Baltimore, MD 21202		
TITLE	DCFO	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CLIFFORD, JOHN			NAME			
STREET ADDRESS	1001 FLEET STREET			STREET ADDRESS			
CITY-ST-ZIP	BALTIMORE, MD 21202			CITY-ST-ZIP			
TITLE	DPCE	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	PARKER, BRUCE G JR			NAME			
STREET ADDRESS	1001 FLEET STREET			STREET ADDRESS			
CITY-ST-ZIP	BALTIMORE, MD 21202			CITY-ST-ZIP			
TITLE	SVCA	<input checked="" type="checkbox"/> Delete		TITLE	SVP; CFO	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	PERREAULT, MICHEL G			NAME	Barry G Ward		
STREET ADDRESS	1001 FLEET ST.			STREET ADDRESS	1001 Fleet St; 7th Floor		
CITY-ST-ZIP	BALTIMORE, MD 21202			CITY-ST-ZIP	Baltimore, MD 21202		
TITLE	DSVP	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LUMBY, VICTOR			NAME			
STREET ADDRESS	1001 FLEET ST.			STREET ADDRESS			
CITY-ST-ZIP	BALTIMORE, MD 21202			CITY-ST-ZIP			
TITLE	SVPG	<input checked="" type="checkbox"/> Delete		TITLE	Assistant Secretary	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	MCGRATH, MICHAEL A			NAME	Robert S Jett, III		
STREET ADDRESS	1001 FLEET ST 7TH FLOOR			STREET ADDRESS	1001 Fleet Street; 6th Floor		
CITY-ST-ZIP	BALTIMORE, MD 21202			CITY-ST-ZIP	Baltimore, MD 21202		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert S Jett      07/06/07      410.895.0093  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

ATTACHMENT 40130175

#814485

1/4/07 Zolt

**OM Financial Life Insurance Company**

(formerly known as Fidelity and Guaranty Life Insurance Company)

Approved by Consent(s) dated April 30, 2007, May 14, 2007, June 15, 2007 and July 1, 2007

**Officers:**

John P. Clifford	Chairman of the Board, Executive Vice President
Bruce G. Parker, Jr.	President and Chief Executive Officer
Jeffrey J. Lobo	Senior Vice President, Chief Investment Officer
Victor Lumby	Senior Vice President, Chief Operating Officer
Barry G. Ward	Senior Vice President & Chief Financial Officer
Alan M. Harrington	Senior Vice President, VA Distribution
John A. Phelps	Senior Vice President, Life/Annuity Distribution
Robert S. Jett, III	Assistant Vice President & Secretary

**Directors:**

John P. Clifford (Chairman)  
Victor Lumby  
Bruce G. Parker, Jr.  
Richard Pretty  
William F. Rothenbach  
David H. Smith  
Barry G. Ward

**Executive Committee:** Victor Lumby; Bruce G. Parker, Jr.; John P. Clifford.

**Investment Committee:** per Charter

**Risk Management Officer:** Pierre van Greunen

**Compliance Officer:** Glenn Jones

ATTACHMENT 40130175  
# 814485



**OLD MUTUAL**

Financial Network

**Old Mutual Financial Network**

1001 Fleet Street  
Baltimore, Maryland 21202  
PH 410.895.0100  
1.888.697.LIFE  
FX 410.895.0162

OM FINANCIAL LIFE INSURANCE COMPANY  
OM FINANCIAL LIFE INSURANCE COMPANY OF NEW YORK

July 19, 2007

Florida Department of State  
Secretary of State  
Division of Corporations  
PO Box 8700  
Tallahassee, Florida 32314

Re: OM Financial Life Insurance Company  
NAIC # 63274

To Whom It May Concern:

Attached please find check number 17504 in the amount of \$150.00, the required fee for the Renewal of Certificate of Authority.

For any questions or concerns, I can be reached at 410.895.0276 or by email at [Gloria.Few@omfn.com](mailto:Gloria.Few@omfn.com).

Sincerely,

A handwritten signature in black ink, appearing to read 'Gloria L. Few'.

Gloria L Few  
Paralegal

enclosures

[www.omfn.com](http://www.omfn.com)