

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836238

FILED
Apr 28, 2006
Secretary of State

Entity Name: GENWORTH LIFE AND HEALTH INSURANCE COMPANY

Current Principal Place of Business:

175 ADDISON ROAD
WINDSOR, CT 06095

New Principal Place of Business:

Current Mailing Address:

175 ADDISON ROAD
WINDSOR, CT 06095

New Mailing Address:

FEI Number: 06-0893662 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSD () Delete
Name: RIPLEY, GEORGE W III
Address: 100 BRIGHT MEADOW BLVD
City-St-Zip: ENFIELD, CT 06082

Title: T () Delete
Name: PRIZZIA, GARY T
Address: 6620 WEST BROAD STREET
City-St-Zip: RICHMOND, VA 23230

Title: D () Delete
Name: BUDDLE, JAMES
Address: 6604 WEST BROAD STREET
City-St-Zip: RICHMOND, VA 23220

Title: PD () Delete
Name: BALDWIN, K. RONE
Address: 100 BRIGHT MEADOW BLVD
City-St-Zip: ENFIELD, CT 06082

Title: VP () Delete
Name: MCKENNEY, RICHARD P
Address: 6620 WEST BROAD STREET
City-St-Zip: RICHMOND, VA 23230

Title: VP () Delete
Name: SANDERS, JOEL D
Address: 100 BRIGHT MEADOW BLVD
City-St-Zip: ENFIELD, CT 06082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSD (X) Change () Addition
Name: RIPLEY, GEORGE W III
Address: 175 ADDISON ROAD
City-St-Zip: WINDSOR, CT 06095

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: BALDWIN, K. RONE
Address: 175 ADDISON ROAD
City-St-Zip: WINDSOR, CT 06095

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GEORGE W. RIPLEY III

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04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date