

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 849227

FILED
Jan 15, 2010
Secretary of State

Entity Name: PUTNAM REINSURANCE COMPANY

Current Principal Place of Business:

80 PINE ST.
NEW YORK, NY 100051701

New Principal Place of Business:

80 PINE ST.
NEW YORK, NY 10005

Current Mailing Address:

80 PINE ST.
NEW YORK, NY 100051701

New Mailing Address:

80 PINE ST.
NEW YORK, NY 10005

FEI Number: 13-3333610

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: D
Name: TIZZIO, THOMAS R.
Address: 175 WATER STREET
City-St-Zip: NEW YORK, NY 10038

Title: SVPG
Name: SCHWARTZ, GARY
Address: 80 PINE ST.
City-St-Zip: NEW YORK, NY 10005

Title: PCEO
Name: ORLICH, ROBERT F.
Address: 80 PINE ST.
City-St-Zip: NEW YORK, NY 10005

Title: EVCF
Name: SKALICKY, STEVEN
Address: 80 PINE ST.
City-St-Zip: NEW YORK, NY 10005

Title: SVP
Name: APFEL, KEN
Address: 80 PINE STREET
City-St-Zip: NEW YORK, NY 10005

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: GARY SCHWARTZ

SVPG

01/15/2010

Electronic Signature of Signing Officer or Director

_____ Date