


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 03, 2004 8:00 am
Secretary of State

03-03-2004 90007 018 ***150.00

DOCUMENT # P01259
 1. Entity Name
INDEPENDENCE LIFE AND ANNUITY COMPANY



Principal Place of Business Mailing Address
ONE SUN LIFE EXECUTIVE PARK **ONE SUN LIFE EXECUTIVE PARK**
SC 1335 **SC 1335**
WELLESLEY HILLS MA 02481 **WELLESLEY HILLS MA 02481**
US **US**



MOORE CR2E034 (11/03)

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **61-0403075** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE FL 32399-0000

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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 \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	PD	<input type="checkbox"/> Delete
NAME	MCNULTY, III, JAMES A	
STREET ADDRESS	ONE SUN LIFE EXECUTIVE PARK	
CITY-ST-ZIP	WELLESLEY HILLS MA 02481	
TITLE	VPI	<input type="checkbox"/> Delete
NAME	ANDERSON, JAMES M.A.	
STREET ADDRESS	ONE SUN LIFE EXECUTIVE PARK	
CITY-ST-ZIP	WELLESLEY MA 02481	
TITLE	S	<input type="checkbox"/> Delete
NAME	KING, ELLEN B	
STREET ADDRESS	ONE SUN LIFE EXECUTIVE PARK	
CITY-ST-ZIP	WELLESLEY HILLS MA 02481	
TITLE	VPII	<input type="checkbox"/> Delete
NAME	DETORA, MARK W	
STREET ADDRESS	ONE SUN LIFE EXECUTIVE PARK	
CITY-ST-ZIP	WELLESLEY MA 02481	
TITLE	VPSB	<input checked="" type="checkbox"/> Delete
NAME	DEMUTH, PETER F	
STREET ADDRESS	ONE SUN LIFE EXECUTIVE PARK	
CITY-ST-ZIP	WELLESLEY MA 02481	
TITLE	CD	<input type="checkbox"/> Delete
NAME	STEWART, DONALD A	
STREET ADDRESS	150 KING STREET WEST	
CITY-ST-ZIP	TORONTO, ON. CANADA m5-h1j9	

TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	McNulty, III, James A.	
STREET ADDRESS	12 Wild Holly	
CITY-ST-ZIP	Medfield, MA 02052	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	President & Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Salipante, Robert C.	
STREET ADDRESS	One Sun Life Executive Park	
CITY-ST-ZIP	Wellesley Hills, MA 02481	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stewart, Donald A.	
STREET ADDRESS	150 King Street West	
CITY-ST-ZIP	Toronto, Ontario, Canada M5H 1J9	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Ellen B. King* Ellen B. King 2/26/04 (781) 446-2486
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Independence Life and Annuity Company

*Attachment
P01259*

James Cameron Baillie

Director

Primary Address: Torys LLP
Suite 3000, TD Centre
79 Wellington Street West
Toronto, Ontario M5K 1N2 (Canada)

David D. Horn

Director

Primary Address: 257 Lake Street
P.O. Box 24
New Vineyard, Maine 04956 (United States)

C. James Prieur

Director & Chairman

Primary Address: Sun Life Assurance Company of Canada
6th floor
150 King Street West
Toronto, Ontario M5H 1J9 (Canada)

S. Caesar Raboy

Director

Primary Address: 220 Boylston Street
Boston, MA 02110

David K. Stevenson

Director

Primary Address: 359 Grove Street
Needham, Massachusetts 02492 (United States)

William Wade Stinson

Director

Primary Address: Sun Life Financial Inc.
150 King Street West, 6th Floor
Toronto, Ontario M5H 1J9 (Canada)

Claude Alan Accum FSA, FCIA

Vice-President and Chief Actuary

Primary Address: Sun Life Financial
One Sun Life Executive Park
Wellesley Hills, Massachusetts 02481 (United States)

Nancy L. Conlin

Vice President and Chief Counsel

Primary Address: Sun Life Financial
One Sun Life Executive Park
Wellesley Hills, Massachusetts 02481 (United States)

Gary Corsi

Vice President and Chief Financial Officer and Treasurer

Primary Address: Sun Life Financial
One Sun Life Executive Park
Wellesley Hills, Massachusetts 02481 (United States)

Philip K. Polkinghorn

Vice President, Annuities

Primary Address: Sun Life Financial
One Sun Life Executive Park
Wellesley Hills, Massachusetts 02481 (United States)