

1.) CORPORATION NAME:

AXA Equitable Life Insurance Company

DUE DATE: **1/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER, 16TH FLOOR
1111 EAST MAIN STREET**

SCC ID NO: **F0000713**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	2,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1290 AVENUE OF THE AMERICAS

CITY/ST/ZIP: NEW YORK, NY 10104

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ANDREW J MCMAHON	
TITLE:	PRESIDENT	
ADDRESS:	1290 AVENUE OF THE AMERICAS	
CITY/ST/ZIP/CO:	NEW YORK, NY 10104	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KAREN FIELD HAZIN	
TITLE:	VP/SEC/AGC	
ADDRESS:	1290 AVENUE OF THE AMERICAS	
CITY/ST/ZIP/CO:	NEW YORK, NY 10104	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DENISE TEDESCHI	
TITLE:	AVP/AS	
ADDRESS:	1290 AVENUE OF THE AMERICAS	
CITY/ST/ZIP/CO:	NEW YORK, NY 10104	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ANDERS MALMSTROM	
TITLE:	SVP/CFO	
ADDRESS:	1290 AVENUE OF THE AMERICAS	
CITY/ST/ZIP/CO:	NEW YORK, NY 10104	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MARK PEARSON	
TITLE:	COB/CEO	
ADDRESS:	1290 AVENUE OF THE AMERICAS	
CITY/ST/ZIP/CO:	NEW YORK, NY 10104	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	HENRI DE CASTRIES	
TITLE:	DIRECTOR	
ADDRESS:	1290 AVENUE OF THE AMERICAS	
CITY/ST/ZIP/CO:	NEW YORK, NY 10104	

NAME: DENIS DUVERNE OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 1290 AVENUE OF THE AMERICAS
CITY/ST/ZIP/CO: NEW YORK, NY 10104

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ KAREN FIELD HAZIN</u>	<u>KAREN FIELD HAZIN,</u>	<u>1/3/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VP/SEC/AGC PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.