

SCC eFile  
(6/10)

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212502292

1.) CORPORATION NAME:

**Longevity Insurance Company**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.  
AUTH IN VI  
CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

DUE DATE: **1/31/2012**

SCC ID NO: **F0197584**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,015,384

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**TX**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: **C/O MORGAN STANLEY & CO. INCORPORATED  
1585 BROADWAY, 4TH FLOOR**

CITY/ST/ZIP: **NEW YORK, NY 10036-**

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:	CAITLIN LONG			
TITLE:	P/BRD MBR/MG DI			
ADDRESS:	1585 BROADWAY			
CITY/ST/ZIP/CO:	NEW YORK, NY 10036-			

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	ETHAN BRONSNICK			
TITLE:	VICE PRESIDENT			
ADDRESS:	1585 BROADWAY			
CITY/ST/ZIP/CO:	NEW YORK, NY 10036-			

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	SACHIYO SAKEMI			
TITLE:	CORP SEC/AST GC			
ADDRESS:	1221 AVENUE OF THE AMERICAS			
CITY/ST/ZIP/CO:	NEW YORK, NY 10020-			

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	DANIEL PARK			
TITLE:	BRD MBR/CIA			
ADDRESS:	750 SEVENTH AVENUE			
CITY/ST/ZIP/CO:	NEW YORK, NY 10019-			

	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	WILLIAM RYAN III			
TITLE:	PRESIDENT			
ADDRESS:	1221 AVENUE OF THE AMERICAS			
CITY/ST/ZIP/CO:	NEW YORK, NY 10020-			

NAME: JIN SUENG CHANG TITLE: VICE PRESIDENT ADDRESS: 1585 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10036-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: HANNA BEILA ZWIEBEL TITLE: VICE PRESIDENT ADDRESS: 1585 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10036-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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.

/s/ ETHAN BRONSNICK SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ETHAN BRONSNICK, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	1/13/2012 DATE
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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.