

1.) CORPORATION NAME:

DUE DATE: **6/30/2011**

PRESIDENTIAL LIFE INSURANCE COMPANY

SCC ID NO: **F0310179**

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	475,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 69 LYDECKER STREET

CITY/ST/ZIP: NYACK, NY 10960-

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.

NAME: DONALD BARNES
TITLE: PRES/CEO
ADDRESS: 4 FORREST RIDGE RD
CITY/ST/ZIP/CO: NYACK, NY 10960-

OFFICER

DIRECTOR

NAME: KATHLEEN DASH
TITLE: SECRETARY
ADDRESS: 34 SMITH AVENUE
CITY/ST/ZIP/CO: SOUTH NYACK, NY 10960-

OFFICER

DIRECTOR

NAME: PAUL B PHEFFER
TITLE: VICE PRESIDENT
ADDRESS: 69 LYDECKER ST
CITY/ST/ZIP/CO: NYACK, NY 10960-

OFFICER

DIRECTOR

NAME: DUNCAN SZETO
TITLE: VICE PRESIDENT
ADDRESS: 69 LYDECKER ST
CITY/ST/ZIP/CO: NYACK, NY 10960-

OFFICER

DIRECTOR

NAME: MARK ABRAMS
TITLE: VICE PRESIDENT
ADDRESS: 69 LYDECKER
CITY/ST/ZIP/CO: NYACK, NY 10960-

OFFICER

DIRECTOR

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/ DONALD BARNES</u>	<u>DONALD BARNES, PRES/CEO</u>	<u>5/2/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	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.