

1.) CORPORATION NAME: STANDARD LIFE AND ACCIDENT INSURANCE COMPANY 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802	DUE DATE: 2/28/2013 SCC ID NO: F0356115 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>75,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	75,000
CLASS	AUTHORIZED				
COMMON	75,000				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY					
4.) STATE OR COUNTRY OF INCORPORATION: TX					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE MOODY PLAZA

CITY/ST/ZIP: GALVESTON, TX 77550-7999

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: G RICHARD FERDINANDTSEN TITLE: P/CEO/CHAIRMAN ADDRESS: ONE MOODY PLAZA CITY/ST/ZIP/CO: GALVESTON, TX 77550-7999	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: JOHN J DUNN, JR TITLE: VICE PRESIDENT ADDRESS: ONE MOODY PLAZA CITY/ST/ZIP/CO: GALVESTON, TX 77550	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: FRANK V BROLL JR TITLE: VP/ACTUARY ADDRESS: ONE MOODY PLAZA CITY/ST/ZIP/CO: GALVESTON, TX 77550	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: WILLIAM F CARLTON TITLE: VP/CONTROLLER ADDRESS: ONE MOODY PL CITY/ST/ZIP/CO: GALVESTON, TX 77550-7999	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: J MARK FLIPPIN TITLE: S/T ADDRESS: ONE MOODY PLAZA CITY/ST/ZIP/CO: GALVESTON, TX 77550	<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/ WILLIAM F CARLTON	WILLIAM F CARLTON, VP/CONTROLLER	2/1/2013
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.