

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213525136

1.) CORPORATION NAME:

ZURICH AMERICAN LIFE INSURANCE COMPANY

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F0399487**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

IL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE LIBERTY PLAZA
165 BROADWAY

CITY/ST/ZIP: NEW YORK, NY 10006-1404

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:	DAVID JAY DIETZ	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT & CEO		
ADDRESS:	ONE LIBERTY PLAZA		
	165 BROADWAY		
CITY/ST/ZIP/CO:	NEW YORK, NY 10006-1404		

NAME:	DAWN MARIE CUMMINGS-FRITZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASSISTANT VP		
ADDRESS:	1400 AMERICAN LANE		
	SCHAUMBURG, IL 60196-1056		

NAME:	JEFFREY SCOTT HORTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP-FIN & TREAS		
ADDRESS:	ONE LIBERTY PLAZA		
	165 BROADWAY		
CITY/ST/ZIP/CO:	NEW YORK, NY 10006-1404		

NAME:	RICHARD JAMES HAUSER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASSISTANT VP		
ADDRESS:	1400 AMERICAN LANE		
	SCHAUMBURG, IL 60196-1056		

NAME:	SIMON JEREMY MICHAEL LODGE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SVP & CFO		
ADDRESS:	ONE LIBERTY PLAZA		
	165 BROADWAY		
CITY/ST/ZIP/CO:	NEW YORK, NY 10006-1404		

NAME: RICHARD WILLIAM GRILLI TITLE: SVP & COO ADDRESS: ONE LIBERTY PLAZA 165 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10006-1404	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: CATHY ELIZABETH EHRLICH TITLE: VP, CHF ACTUARY ADDRESS: ONE LIBERTY PLAZA 165 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10006-1404	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: PATRICK JOSEPH CARTY TITLE: VP, GNR COUNSEL ADDRESS: ONE LIBERTY PLAZA 165 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10006-1404	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: MICHAEL ANTHONY DISTASI TITLE: ASSISTANT VP ADDRESS: ONE LIBERTY PLAZA 165 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10006-1404	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: STUART CRAIG BERMAN TITLE: ASSISTANT VP ADDRESS: ONE LIBERTY PLAZA 165 BROADWAY CITY/ST/ZIP/CO: NEW YORK, NY 10006-1404	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: PAUL WALTER NOFFKE TITLE: ASSISTANT VP ADDRESS: 1400 AMERICAN LANE CITY/ST/ZIP/CO: SCHAUMBURG, IL 60196-5452	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: LEEANN GLADYS BADGETT TITLE: ASSISTANT VP ADDRESS: 3003 77TH AVE SE CITY/ST/ZIP/CO: MERCER ISLAND, WA 98040	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> 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.		
/s/ LEEANN GLADYSBADGETT	LEEANN GLADYSBADGETT,	5/29/2013
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.		