

SCC eFile

2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

214532786

1.) CORPORATION NAME:

**FAMILY SERVICE LIFE INSURANCE COMPANY**

DUE DATE: **7/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY**

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

SCC ID NO: **F0444945**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**TX**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7 HANOVER SQUARE

CITY/ST/ZIP: NEW YORK, NY 10004-2616

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:	MICHAEL SLIPOWITZ		
TITLE:	PRESIDENT/CEO		
ADDRESS:	7 HANOVER SQ		
CITY/ST/ZIP/CO:	NEW YORK, NY 10004-2616		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KAREN FARNSWORTH EINSIDLER		
TITLE:	VP INV & RE COU		
ADDRESS:	7 HANOVER SQUARE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10004-2616		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MARGHERITA L DIMANNI		
TITLE:	SVP/CORP SEC		
ADDRESS:	7 HANOVER SQUARE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10004-2616		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ALPHONSUS L PADAVANO		
TITLE:	AVP/CONTROLLER		
ADDRESS:	7 HANOVER SQUARE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10004-2616		

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DEAN DEL VECCHIO		
TITLE:	EVP/CIO		
ADDRESS:	7 HANOVER SQUARE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10004-2616		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	SEAN D QUINN		
TITLE:	DIRECTOR		
ADDRESS:	7 HANOVER SQUARE		
CITY/ST/ZIP/CO:	NEW YORK, NY 10004-2616		

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/ MARGHERITA L DIMANNI</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>MARGHERITA L DIMANNI, SVP/CORP SEC</u> PRINTED NAME AND CORPORATE TITLE	<u>6/25/2014</u> 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.