

1.) CORPORATION NAME:

**LANCER MANAGEMENT COMPANY, INC.**

DUE DATE: **10/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD  
SUITE 301**

SCC ID NO: **F1604273**

**GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NY**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 370 W PARK AVE

CITY/ST/ZIP: LONG BEACH, NY 11561

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:	WAYNE S RICCI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	370 WEST PARK AVENUE		
CITY/ST/ZIP/CO:	LONG BEACH, NY 11561		

NAME:	ANN MARIE MCTERNAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	S VP		
ADDRESS:	370 W PARK AVE		
CITY/ST/ZIP/CO:	LONG BEACH, NY 11561		

NAME:	EDWARD M TEMKIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	370 W PARK AVE		
CITY/ST/ZIP/CO:	LONG BEACH, NY 11561		

NAME:	Timothy D. Delaney	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SEVP		
ADDRESS:	370 West Park Ave.		
CITY/ST/ZIP/CO:	Long Beach, NY 11561		

NAME:	Alistair T. Lind	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	370 West Park Ave.		
CITY/ST/ZIP/CO:	Long Beach, NY 11561		

NAME:	James O. Eason, Jr.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	111 Corning Road		
CITY/ST/ZIP/CO:	Cary, NC 27511		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Gail W. Reilly SVP 370 West Park Ave. Long Beach, NY 11561	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John A. Petrilli Secretary 370 West Park Ave. Long Beach, NY 11561	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Shirley B. Ortego VP 370 West Park ave. Long Beach, NY 11561	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Pamela M. Marin VP One Fairchild Court, Suite 200 Plainview, NY 11803	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Timothy R. O VP 370 West Park Ave. Long Beach, NY 11561	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Steven M. Shapiro VICE PRESIDENT 370 West Park Ave. Long Beach, NY 11561	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Kieran G. McGowan VICE PRESIDENT One Fairchild Court, Suite 200 Plainview, NY 11803	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Janis S. Moscato AVP 370 West Park ave. Long Beach, NY 11561	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Leslie Neverson-Drake AVP 370 West Park Ave. Long Beach, NY 11561	<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/ Gail W.Reilly	Gail W.Reilly,	8/24/2012
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.