

No. <b>W 146908</b>	<b>Due no later than Jan 31, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  PACIFIC SELECT DISTRIBUTORS, LLC PACIFIC LIFE INSURANCE COMPANY 700 NEWPORT CENTER DR NEWPORT BEACH CA 92660		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	PACIFIC LIFE INSURANCE COMPANY	700 NEWPORT CENTER DRIVE	NEWPORT BEACH	CA	USA	92660
5. Organized Under the Laws of:  <b>DE</b> <b>W 146908</b>		6. Annual Report must be signed.* Signature: Jane M. Guon Name (type or print): Jane M. Guon Date: 12/06/2016 Title: VP & Secretary				
Processed 12/06/2016		* Electronically provided signatures are accepted as original signatures.				