

# **I-File Introductory User Guide** *(Life and Health Product Review)*



David Altmaier, Commissioner

**Updated June 2013**

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# Verify Internet Explorer Version

The screenshot shows a Microsoft Internet Explorer browser window titled 'Industry Portal - Microsoft Internet Explorer'. The address bar displays 'https://portal.fldfs.com/iframe/'. The browser's menu bar includes 'File', 'Edit', 'View', 'Favorites', 'Tools', and 'Help'. The 'Help' menu is open, showing options like 'Contents and Index', 'Tip of the Day', 'For Netscape Users', 'Online Support', 'Send Feedback', and 'About Internet Explorer'. The 'About Internet Explorer' dialog box is open, displaying the Microsoft Internet Explorer logo and the version number '8.0.2800.1106', which is circled in black. Below the version number, the dialog box lists 'Cipher Strength: 128-bit', 'Product ID: 51873-005-0272901-09548', and 'Update Versions: ; 5P1; Q810847; Q813951; Q832894; Q828750; Q831167; Q867801; Q833989; Q823353; Q903235;'. It also includes a scrollable text area with the text: 'Based on NCSA Mosaic. NCSA Mosaic(TM); was developed at the National Center for Supercomputing Applications at the University of Illinois at Urbana-Champaign.' The dialog box has an 'OK' button and a copyright notice: 'Copyright ©1995-2001 Microsoft Corp. Acknowledgements'. The background website shows a navigation menu with 'Home', 'Help', and 'Contact'. The 'Common Tasks' section lists 'Set up an account' and 'Filing workbench'. The main content area says 'Welcome to the The Industry P Filing Assembly Quarterly Subm'.

**You will need Internet Explorer 8 or higher to use I-File.**

# Accessing the Industry Portal

www.floir.com

The screenshot shows the Florida Office of Insurance Regulation website. At the top, the text "FLORIDA OFFICE OF INSURANCE REGULATION" is displayed in a white box. To the right, the name "KEVIN M. McCARTY Insurance Commissioner" and his signature are shown. Below this is a navigation bar with several menu items: "Company Filing", "Industry Data", "Insurance Types", "Government Affairs", "Newsroom", and "About the Office". The "Company Filing" menu is expanded, showing a sub-menu with "Industry Portal" at the top, followed by "Required Filing and Reporting", "Data Reporting Requirements", "Company Admissions", "Filing Search", and "Assessments". A red arrow points from the title above to the "Industry Portal" link. Below the navigation bar, the main content area features a "Welcome" message and a paragraph: "The Office serves Floridians through its responsibilities for regulation, compliance and enforcement of statutes related to the business of insurance. The Office is also entrusted with the duty of carefully monitoring statewide industry markets." Below this text are six icons representing different services: "Insurance Types" (house icon), "Company Filing Information" (folder icon), "Government Affairs" (building icon), "News" (newspaper icon), "Assessments" (chart icon), and "Public Records Request" (water cooler icon). A large photograph of two men in suits talking is also present. The browser's address bar shows "http://www.floir.com/index.aspx".

# Select the Form & Rate Filing Assembly and Submission Link

Welcome to the Industry Portal - Windows Internet Explorer

http://www.flor.com/iportal

File Edit View Favorites Tools Help

Google Search CNN Mail G+ Share Check Translate AutoFill Sign In

Home Feeds (1) Read Mail Print

Welcome to the Industry... Home - Florida Office of Insu...

## FLORIDA OFFICE OF INSURANCE REGULATION

KEVIN M. McCARTY  
*Insurance Commissioner*

### Common Tasks

- [Set up an account](#)
- [Start a new Form or Rate filing](#)
- [Filing workbench](#)

### User Manuals

- [L&H IFile Introductory User Guide](#)
- [P&C IFile Introductory User Guide](#)
- [P&C RCS Training and User Manual](#)

## Welcome to the Industry Portal

Welcome to the Florida Office of Insurance Regulation Industry Portal. The Industry Portal is a convenient, single point of entry to access the Filing Assembly and Submission System, online Rate Collection Systems, Quarterly Submission Reports, and other related content.

- **Form & Rate Filing Assembly and Submission**
- [Regulatory Electronic Filing System \(REFS\)](#)
- [Data Collection and Analysis Modules \(DCAM\)](#)
- [QUASR Next Generation \(QUASRng\)](#)
- [Professional Liability Claims Reporting](#)
- [Workers' Compensation Data Collection](#)
- [Update Disaster Contact Information & PIP Contact Information](#)
- [iApply - Online Company Admissions](#)

Local intranet 110%

# I-Portal Options

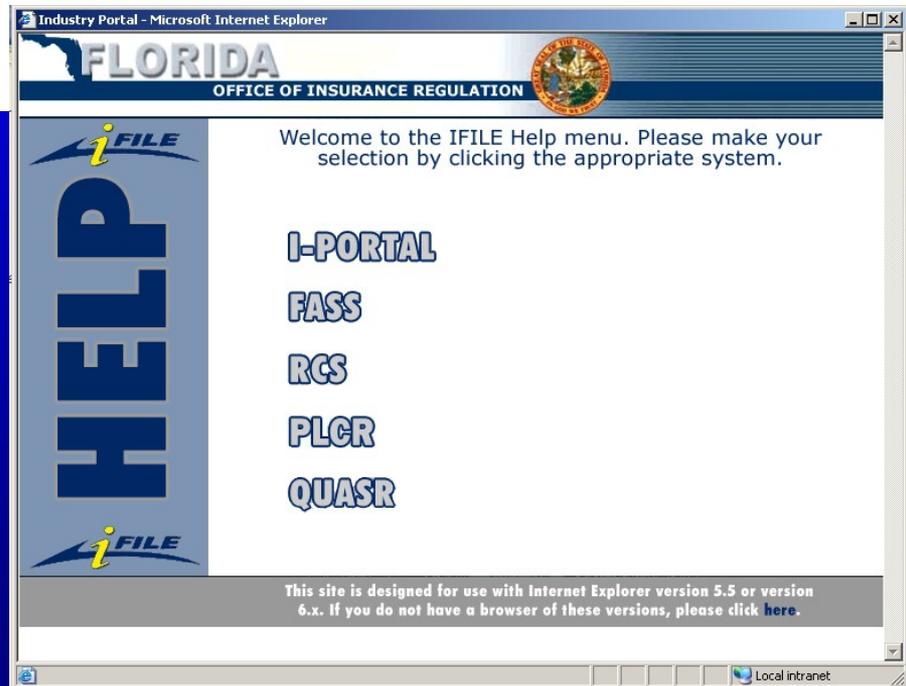


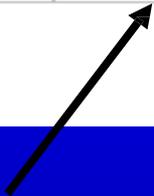
Clicking “Home” on any page will bring you back to the main I-Portal screen.



Clicking “Help” will pull up the following window.

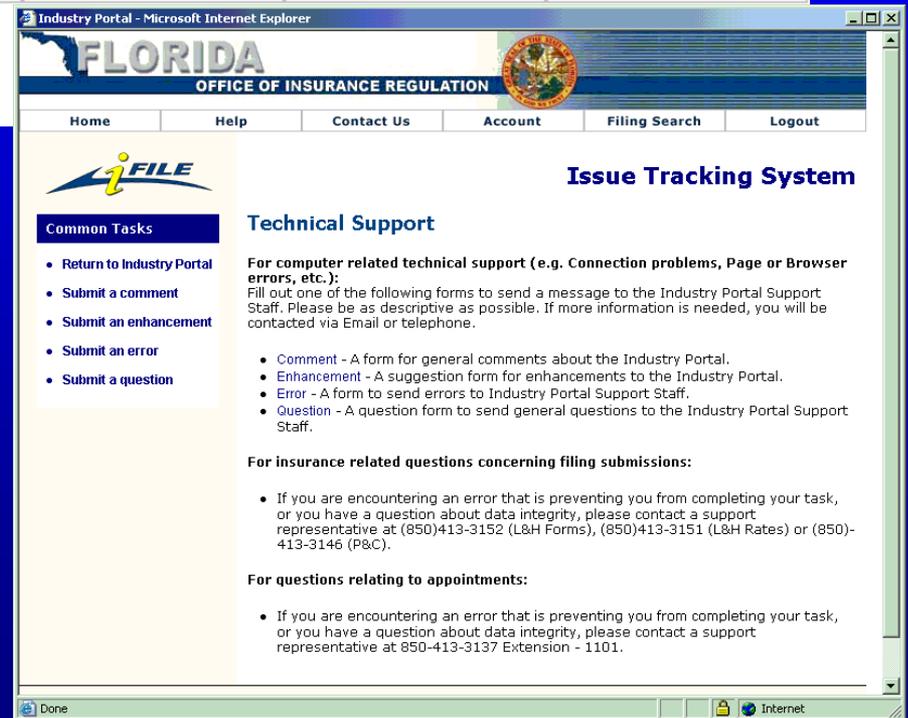
Here you can access help for any of the listed I-Portal applications.





Clicking “Contact Us” pulls up the following window.

Here you can submit comments, enhancement suggestions, errors, and/or questions to OIR.





Clicking “Account” will take you to a login screen.

**Log on to the Industry Portal**

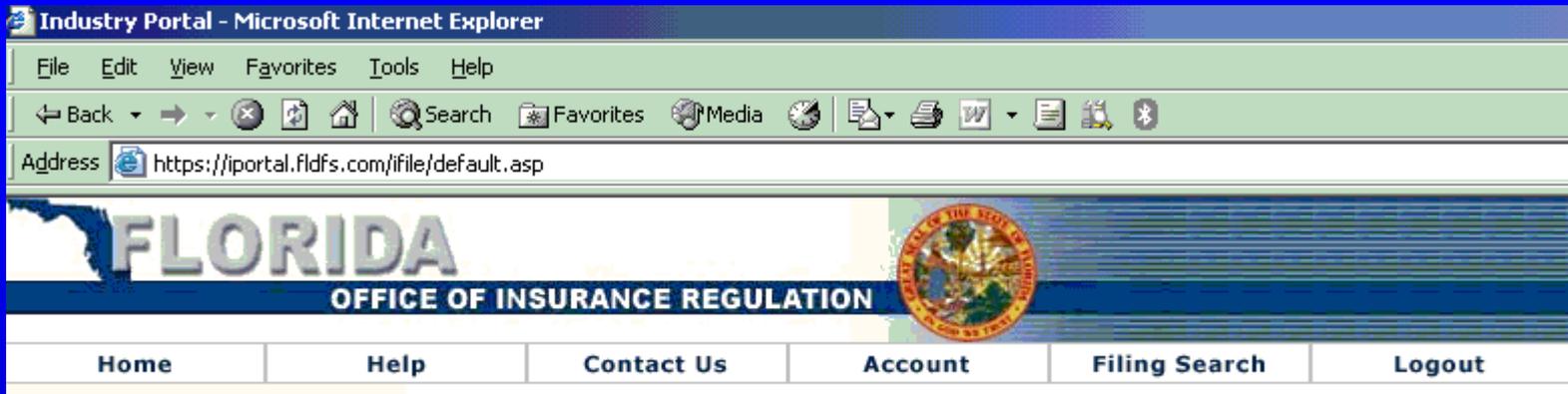
Please enter your user name and password to log on to the Industry Portal. Click 'submit' to continue.

User Name:

Password:



Enter your username and password to view and/or update your account information.



### My Account

#### Personal

First Name: Patrick  
Middle Initial:  
Last Name: Lynch  
E-Mail Address (User Name): Patrick.Lynch@fldfs.com

#### Phone

Phone Number: 850-413-3140  
Phone Extension:  
Fax Number:

#### Address

Street: 200 East Gaines Street  
Optional Street:  
City: Tallahassee  
State: FL  
ZIP/Postal Code: 32399  
Country: UNITED STATES

#### Position

Position Title:  
Department Name:

## Welcome to the Industry Portal

Click "Update" to change your user information.

\*\* If your email address changes in the future, simply make the change here, rather than creating another account. \*\*



The “Filing Search” option takes you to a page that allows you to search for, view, and receive information regarding Form & Rate filings submitted to the Office.

**\*\* The Filing Search is the place to view the documents you’ve submitted for review. Keep in mind, you will need a file log number to easily locate the documents in question. \*\***

Enter a file log number or any other criteria to retrieve filings.

Then click "Search" to display your results to the right.

IFWS Filing Search - Microsoft Internet Explorer

Address: http://www.rdfs.com/edms/

**Florida Department of Financial Services**  
I-File Workflow System  
Forms & Rates Search Page

Please enter your search criteria below and press the Search button

File Log #: 05-123

Company Name: \_\_\_\_\_

FEIN: \_\_\_\_\_

Filing Date (From): \_\_\_\_/\_\_\_\_/\_\_\_\_

Filing Date (To): \_\_\_\_/\_\_\_\_/\_\_\_\_

Form #: \_\_\_\_\_

Filing Type:  Forms Only  
 Rates Only  
 Both (Forms and Rates)  
 PPA

Line of Business: Desc order Code order  
\_\_\_\_\_

Keywords: Clear  
2004 FHCF  
Application, WC  
Building Code Discount - ISO  
Building Code Discount - OIR  
Building Code Discount - Other  
Building Code Discount - Withdrawn  
(Use ctrl or shift to multi-select)

Clear All Search

Count	File Log Number	Status	Roll/Frame	Company Name	FEIN	Date Filed	Filing Type
1	05-12300	APPROVED		AVMED, INC.	592742907	10/11/2005	Forms
2	05-12301	APPROVED		TWIN CITY FIRE INSURANCE COMPA	060732738	10/11/2005	Forms
3	05-12302	APPROVED		AMERICAN SOUTHERN HOME INSURAN	592236254	10/11/2005	Rates
4	05-12303	WITHDRAWN		LYNDON PROPERTY INSURANCE COMP	431139865	10/11/2005	Rates
5	05-12304	APPROVED		VARIABLE ANNUITY LIFE INSURANC	741625348	10/11/2005	Forms
6	05-12305	Pending		ASSURTY LIFE INSURANCE COMPAN	381843471	10/11/2005	Both
7	05-12306	ACKNOWLEDGED		NORTHWESTERN MUTUAL LIFE INSUR	390509570	10/11/2005	Rates
8	05-12307	APPROVED		BLUE CROSS & BLUE SHIELD OF FL	592015694	10/11/2005	Both
9	05-12308	APPROVED		BLUE CROSS & BLUE SHIELD OF FL	592015694	10/11/2005	Both
10	05-12309	APPROVED		BLUE CROSS & BLUE SHIELD OF FL	592015694	10/11/2005	Both
11	05-12310	APPROVED		HEALTH OPTIONS, INC.	592403696	10/11/2005	Both
12	05-12311	APPROVED		HEALTH OPTIONS, INC.	592403696	10/11/2005	Both
13	05-12312	Pending		METROPOLITAN LIFE INSURANCE CO	135581829	10/11/2005	Both
14	05-12313	INCOMPLETE		NEW YORK LIFE INSURANCE COMPAN	135582869	10/11/2005	Forms

Clicking on a file log number will display that filing's contents in the window below.

7	05-12306	ACKNOWLEDGED		NORTHWESTERN MUTUAL LIFE INSUR	390509570	10/11/2005	Rates	450	N/A
8	<b>05-12307</b>	APPROVED		BLUE CROSS & BLUE SHIELD OF FL	592015694	10/11/2005	Both	450	N/A
9	05-12308	APPROVED		BLUE CROSS & BLUE SHIELD OF FL	592015694	10/11/2005	Both	450	N/A
10	05-12309	APPROVED		BLUE CROSS & BLUE SHIELD OF FL	592015694	10/11/2005	Both	450	N/A
11	05-12310	APPROVED		HEALTH OPTIONS, INC.	592403696	10/11/2005	Both	718	N/A
12	05-12311	APPROVED		HEALTH OPTIONS, INC.	592403696	10/11/2005	Both	718	N/A
13	05-12312	Pending		METROPOLITAN LIFE INSURANCE CO	135581829	10/11/2005	Both	420	N/A
14	05-12313	INCOMPLETE		NEW YORK LIFE INSURANCE COMPAN	135582869	10/11/2005	Forms	410	N/A

FLORIDA HOSPITALITY MUTUAL

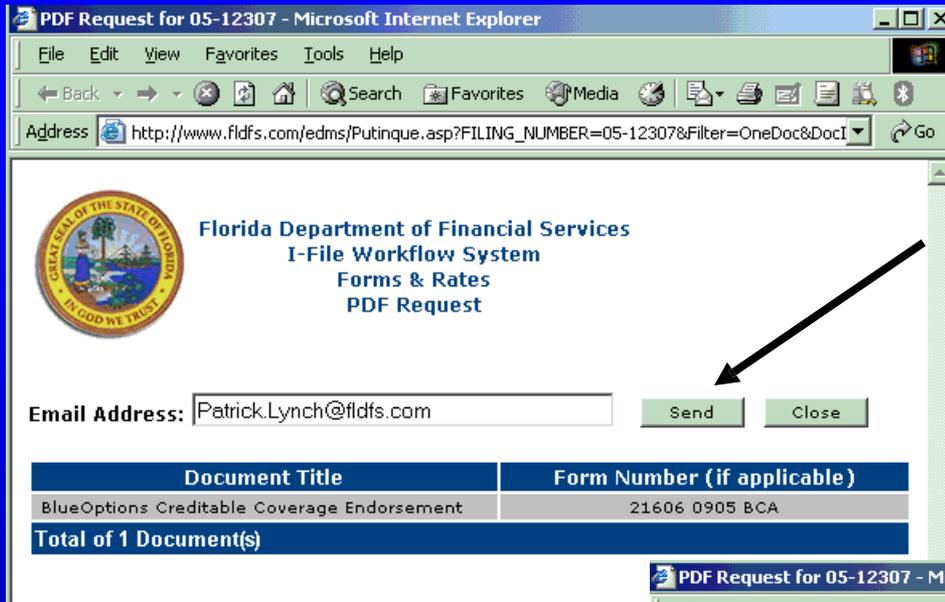
Make a PDF for filing 05-12307 Stamped Only

Type	Form Number	Creation Date	Document Title	PDF
Actuarial Memorandum	n/a	10/11/2005	Actuarial Memorandum	
Manual/Rate Pages	n/a	10/11/2005	Rate Pages	
USDL/Transmittal	n/a	10/11/2005	UDL	
Cover Letter	n/a	10/11/2005	Cover Letter	
Forms	21595 0905 BCA	10/11/2005	BlueOptions Special Enrollment Endorsement	
Forms	21606 0905 BCA	10/11/2005	BlueOptions Creditable Coverage Endorsement	
Forms	21621 0905 BCA	10/11/2005	BlueOptions Continuing Coverage Endorsement	
RTF	n/a	10/12/2005	RateFilingSummary	
RTF	n/a	10/17/2005	Forms_Approval	
EMAIL	n/a	10/17/2005	Florida Office of Insurance Regulation [RE: Filing Number 05-12307]	

Make a PDF for filing 05-12307 Stamped Only

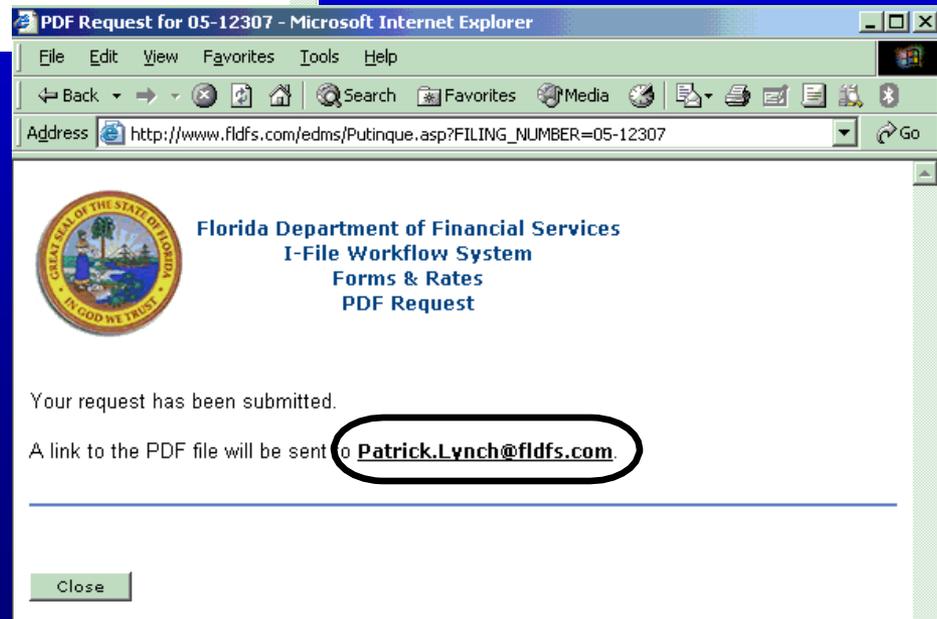
Clicking on one of the PDFs to the right will prompt you to enter your email address, so you can receive a link to that document.

You also have the option of requesting a PDF of the entire filing or just the stamped pages.



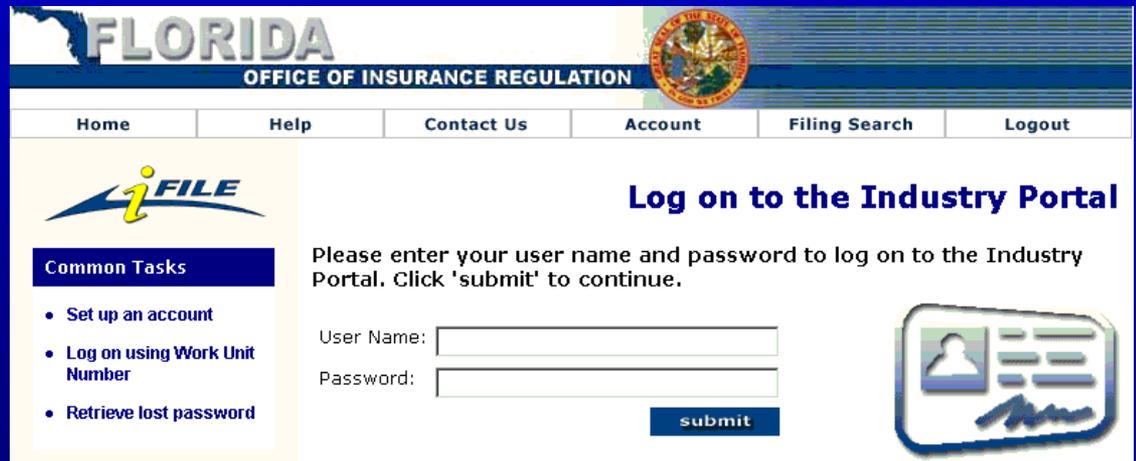
Click “Send” to process your request...

...and an email containing a link to the requested PDF will be sent to the address you provide.





Clicking “Logout” will simply log you out of the I-Portal, bringing you back to the Login screen.



# Navigating the I-Portal

## Navigation



- Save** Click the 'Save' button to save the information on the current page and return to component list page.
- Cancel** Click the 'Cancel' button to return to the component list page and abandon all changes on the current page.
- Previous** Click the 'Previous' button to save the information on the current page and return to the preceding page.
- Next** Click the 'Next' button to save the information on the current page and proceed to next page.

When working on a filing, it is **VERY** important that you use the navigation buttons within the application (shown above) instead of the Internet browser buttons.

Using the Internet browser buttons can lead to application time-outs and other filing problems.



# Creating an I-Portal Account

The screenshot shows the Florida Office of Insurance Regulation Industry Portal. The browser window title is "Welcome to the Industry Portal - Windows Internet Explorer" and the address bar shows "http://www.flair.com/iportal". The page header includes the Florida Office of Insurance Regulation logo and the name of the Insurance Commissioner, Kevin M. McCarty. The main content area is titled "Welcome to the Industry Portal" and contains a list of services. A sidebar on the left has two sections: "Common Tasks" and "User Manuals". A red arrow points to the "Set up an account" link in the "Common Tasks" section.

**FLORIDA OFFICE OF INSURANCE REGULATION**

**KEVIN M. McCARTY**  
*Insurance Commissioner*

## Common Tasks

- **Set up an account**
- **Start a new Form or Rate filing**
- **Filing workbench**

## User Manuals

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- **Workers' Compensation Data Collection**
- **Update Disaster Contact Information & PIP Contact Information**
- **iApply - Online Company Admissions**

Local intranet 110%

Fill in the form with your information (note the required fields).

When you're done, simply click "Create Account" at the bottom of the page.

**iFILE**

### Set Up An Account

This page allows you to setup a new Industry Portal account. Please fill in the following fields and click "Create Account" at the bottom of this page when you are finished. If you do not want to create an account, please click "Cancel". In order to create a new account you must fill in all the fields marked with a red star (\*).

**NOTE:** The email address you fill in will be your User Name to access the Industry Portal. Please fill in an email address that you have access to, as you will need access to this email address to activate your account.

**Account Tasks**

- Update your account
- View your account

**Personal**

\* First Name:

Middle Initial:

\* Last Name:

\* E-Mail Address (User Name):

\* Password:

\* Re-type Password:

**Phone**

\* Phone Number:

Phone Extension:

Fax Number:

**Address**

\* Street:

Optional Street:

\* City:

\* State:

\* ZIP/Postal Code:

\* Country: UNITED STATES

**Position**

Position Title:

Department Name:

The screenshot shows the Florida Office of Insurance Regulation website. At the top, there is a navigation bar with links for Home, Help, Contact Us, Account, Filing Search, and Logout. Below the navigation bar, the 'iFILE' logo is on the left, and the heading 'Set Up An Account' is on the right. The main content area contains a confirmation message: 'An account has been successfully created. A message has been sent to the e-mail address you entered when you created this account. In that message, you **must** follow instructions on how to activate your account.' Below the message is a 'Done' button. On the left side, there is a 'Common Tasks' section with a list of links: 'Set up an account', 'Filing workbench', and 'What is the Industry Portal'.

The next screen will display a message that your account has been successfully created.

You'll also receive a VERY important email at this time as well. (Please allow up to an hour for delivery of this email.)

You **MUST** click the link in that email to activate your account before you can proceed creating / submitting filings.

The screenshot shows an email from the Florida Office of Insurance Regulation. The subject is 'Florida Office of Insurance Regulation'. The body of the email reads: 'Welcome to the Florida Office of Insurance Regulation Industry Portal! You have successfully created a new account. In order to activate your account, simply point your web browser to the following URL: <http://file/account/activate.asp?txtActivationCode=> You have 7 days to activate your account. If you do not activate your account within this time, it will be removed. Your account information is listed below for future reference: Your user name is: You selected your password at registration. If you did not authorize this registration, someone has mistakenly registered using your e-mail address. We regret the inconvenience. Please forward this e-mail to [jportal@fldfs.com](mailto:jportal@fldfs.com) and write "cancel" in the subject line.' A black arrow points from the text in the second slide to the URL in this screenshot, which is circled in black.

Please send a message to OIR through "Contact Us" if you do not receive this email after an hour upon creating your account.



### Common Tasks

- [Set up an account](#)
- [Start a new Form or Rate filing](#)
- [Filing workbench](#)

### User Manuals

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- [P&C IFile Introductory User Guide](#)
- [P&C RCS Training and User Manual](#)

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- [Professional Liability Claims Reporting](#)
- [Update Disaster Contact Information & PIP Contact Information](#)
- [Workers' Compensation Data Collection](#)
- [iApply - Online Company Admissions](#)



## Filing Assembly Submission System

### Common Tasks

- [Start a new filing](#)
- [Submit a filing](#)
- [Review submitted filings](#)
- [Add to a submitted filing](#)

### Other Places

- [Filing workbench](#)

Welcome to the Filing Assembly Submission System (FASS). Here, you can build and maintain filings required by the Office. To start a new filing, click [Start a new filing](#). To work on an existing filing, click [Work on an in-progress filing](#). To review a filing already submitted to the Office, click [Review submitted filings](#).

### Choose a Task

		
<a href="#">Start a new filing</a>	<a href="#">Work on an in-progress filing</a>	<a href="#">Review submitted filings</a>

On this screen you have the option to start a new filing, work on an in-progress filing, or review filings that you have previously submitted.

To start a new filing, simply click the “Start a new filing” link.

The screenshot shows the Florida Office of Insurance Regulation website. At the top, there is a navigation bar with links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled "Start a New Filing" and includes a "Welcome to the New Filing Wizard" section. This section contains a paragraph explaining the process and a "Click 'Next' to continue." instruction. Below the text are two buttons: "Cancel" and "Next". On the left side, there is a sidebar with a "Common Tasks" menu containing links for "Start a new filing", "Submit a filing", "Review submitted filings", and "Add to a submitted filing". Below that is an "Other Places" menu with a link for "Filing workbench".

**FLORIDA**  
**OFFICE OF INSURANCE REGULATION**

Home Help Contact Us Account Filing Search Logout

**iFILE**

**Start a New Filing**

**Welcome to the New Filing Wizard**

This section steps you through the process of starting a new filing. You will be guided through a series of choices to determine the required filing components.

Click "Next" to continue.

Cancel Next

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

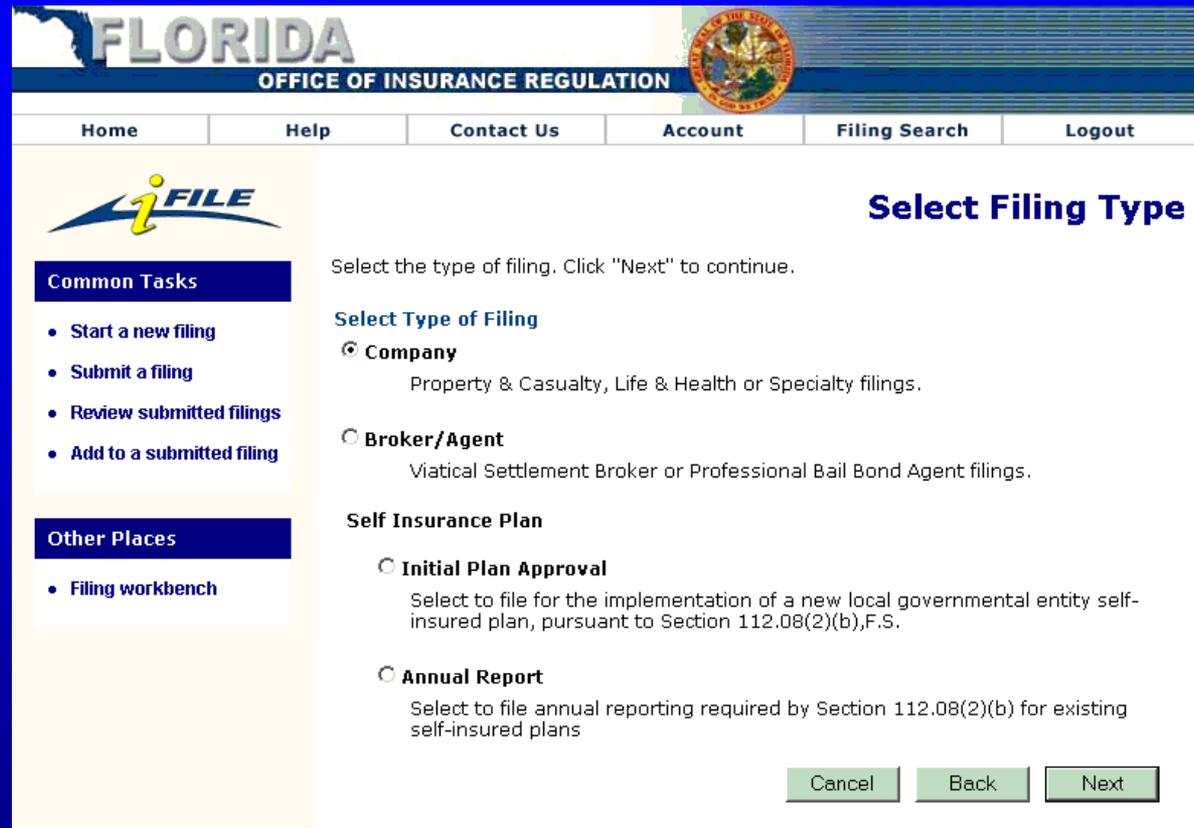
You will then be taken to the New Filing Wizard which will walk you through each step of the filing creation process. Click “Next” to proceed, or click “Cancel” to return to the Filing Assembly Submission System screen.

You may be asked to login prior to reaching the wizard. Do so, and you will be taken to this page.

The first thing you will need to do is select the type of filing you wish to submit.

This manual will demonstrate how to submit an annuity filing, so we will choose “Company” as our filing type. Check the “Company” radio button, and click “Next”.

(You can always return to the previous screen by clicking “Back” and to the Filing Assembly Submission System screen by clicking “Cancel”.)



The screenshot shows the Florida Office of Insurance Regulation website. The header includes the state name 'FLORIDA' and the 'OFFICE OF INSURANCE REGULATION' logo. A navigation bar contains links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled 'Select Filing Type' and includes a sidebar with 'Common Tasks' (Start a new filing, Submit a filing, Review submitted filings, Add to a submitted filing) and 'Other Places' (Filing workbench). The main area prompts the user to 'Select the type of filing. Click "Next" to continue.' and lists three options: 'Company' (selected), 'Broker/Agent', and 'Self Insurance Plan'. Each option has a brief description. At the bottom right, there are three buttons: 'Cancel', 'Back', and 'Next'.

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

Home Help Contact Us Account Filing Search Logout

**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Select Filing Type**

Select the type of filing. Click "Next" to continue.

**Select Type of Filing**

**Company**  
Property & Casualty, Life & Health or Specialty filings.

**Broker/Agent**  
Viatical Settlement Broker or Professional Bail Bond Agent filings.

**Self Insurance Plan**

**Initial Plan Approval**  
Select to file for the implementation of a new local governmental entity self-insured plan, pursuant to Section 112.08(2)(b), F.S.

**Annual Report**  
Select to file annual reporting required by Section 112.08(2)(b) for existing self-insured plans

Cancel Back Next




Home      Help      Contact. Us      **Account**      **Filing Search**      Logout

# *FILE--* Select Area of Insurance

Select the area of insurance for this filing. Click "Next" to continue.

**Common Tasks**

- start a new filing
- Submit a filing
- Review submitted filings
- Addto a submitted filing

**Select area of Insurance**

- Property & Casualty
- Life & Health
- Specialty

**Other Places**

- Filing workbench

     Back      |     

Select "Life & Health" as your Area of Insurance, and click "Next".

Next, you will be asked to select your submission option. If you wish to file an annuity and have it simultaneously reviewed and approved by multiple states, select “Multi-State Filing” as your submission option.

For a Florida-only annuity review, or to file any other product, select “Florida Only Filing”.

After making your selection, click “Next”.

(Multi-State Filing information is provided on pages 91 - 94)

The screenshot shows the Florida Office of Insurance Regulation's iFILE website. The header includes the Florida state logo and the text "FLORIDA OFFICE OF INSURANCE REGULATION". A navigation bar contains links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled "Select Submission Option" and contains the following text:

Please select a submission option for this filing.

Click "Next" to continue.

**Select Submission Option**

- Florida Only Filing**  
Selecting "Florida Only Filing" indicates that you wish to have your product submission reviewed for use in the State of Florida only.
- Multi-State Filing**  
Selecting this option indicates that you wish to use "Multi-State Filing" for product submissions to obtain cooperative review by the states listed. This is a voluntary program initiated by the states and is provided for your convenience.  
  
Please note that to submit a "Multi-State Filing", the carrier(s) you represent must have a valid, active Certificate of Authority in the states of **California, Florida, and Texas**. Additionally, any action by this program does not constitute, imply, or convey any additional authorities to the submitting carrier(s) other than those previously granted by the associated states.  
  
Note that if you are licensed in any of the other states participating in this program, acceptance of your filing will result in an approval from those states.  
  
Before submitting your filing for Multi-State Review, you must read and agree to the [Terms of Use and Agreement](#).

If you have any questions concerning which of these selection options is appropriate for your filing, please contact your IFile host, the Florida Area of Life and Health Forms and Rates via email at [lhfrbureau@fdfs.com](mailto:lhfrbureau@fdfs.com) or call 1-850-413-3152 (Forms Section) or 1-850-413-3151 (Rates Section).

Buttons for "Cancel", "Back", and "Next" are located at the bottom right of the page.

**FLORIDA**  
**OFFICE OF INSURANCE REGULATION**

Home Help Contact Us Account Filing Search Logout



## Search For a Company

Please select the company for this filing.

Please enter your NAIC Company Code:

If you do not have or do not know your NAIC Company Code, [click here](#).

Cancel Back Next

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Now you need to associate a company with your filing. If you know your company's NAIC Company Code, enter it in the space provided. Otherwise, use the "click here" link to search for your company.

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

Home Help Contact Us Account Filing Search Logout

**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Search For a Company**

Please select the company for this filing.

Anywhere
  Starts With
  Exact Match

Company Name:

NAIC Company Code:

NAIC Group Code:

FEIN:

Florida Company Code:

You can search by any of the listed fields. Enter your information, and click “Next”.



## Select a Company

**Common Tasks**

- start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing
- Filing workbench

Use this page to review the results of your search. Select a company to assign to this filing.

**Search Results:**

viewing 1-3 of 3 matches

Company Name	Authority Category	NAIC Company Code	Florida Company Code
PRUCO LIFE INSURANCE COMPANY	LIFE AND HEALTH INSURER	179227	05682
PRUDENTIAL INSURANCE COMPANY OF AMERICA	LIFE AND HEALTH INSURER	168241	06300
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	LIFE AND HEALTH INSURER	193629	05896

viewing 1-3 of 3 matches

Cancel | Back | **Next**

Choose the company on whose behalf you are filing. Then click "Next".

Creating the product for your filing is a three step process. The first step is to select your Line of Business. Those listed in bold print are the lines that your company is authorized to submit. If your company's application to market a certain line is currently under review, I-File will allow you to create your filing, but you will not be allowed to submit it until the application is approved.

Make your selection, and click "Next".

As you proceed through the wizard, you'll also notice that each option is hyperlinked. Click the link to display a description for that specific choice.

**iFILE**

**Select the Line of Business**

Please select one line of business for this filing. You are currently authorized to submit a filing for all the lines of business that are **bold**. You may choose to create a filing for one of the unauthorized lines, but you will not be able to submit your filing until you have the Office's authorization.

Click "Next" to continue.

**Select Line of Business**

- Accident and Health Products (450)
- Continuing Care Retirement Community (CCRC) Plans (720)
- Credit Disability Products (441)
- Credit Life Products (440)
- Discount Medical Plans (709)
- Fraternal Accident and Health Products (430)
- Fraternal Life and/or Annuity Products (425)
- Group Life and/or Annuity Products (410)**
- Health Flex Plans (710)
- Health Maintenance Organization (HMOs) Plans (718)
- Individual Life and/or Annuity Products (400)**
- Individual and/or Group Variable Annuities Products (405)
- Individual and/or Group Variable Life Products (420)
- Misc Prepaid Limited Health Services Organization Plans (785)
- Multiple Employer Welfare Agreement (MEWA) Products (455)

**The number in ( ) denotes the FL code for that line of business.**

**Line of Business Description - Microsoft Internet Explorer**

**Individual Life and/or Annuity Products**

Pursuant to Section 624.602(1), FS: "Life insurance" is insurance of human lives. The transaction of life insurance includes also the granting of annuity contracts, including, but not limited to, fixed or variable annuity contracts; the granting of endowment benefits, additional benefits in event of death or dismemberment by accident or accidental means, additional benefits in event of the insured's disability; and optional modes of settlement of proceeds of life insurance. Life insurance does not include workers' compensation coverages.

Close

- Prepaid Substance Abuse Services Only Plans (782)
- Viatical Settlements (708)

Cancel Back Next

https://portal.fldfs.com/IFILE/fass/create/select\_ppaca.asp

File Edit View Favorites Tools Help

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Home Feeds Read Mail Print

Industry Portal

**FLORIDA**  
OFFICE OF INSURANCE REGULATION



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## Patient Protection and Affordable Care Act (PPACA)

Does this filing include new PPACA-compliant forms and/or rates (new product or modifications to existing products sold on or off the exchange/marketplace) including the essential health benefits to be effective on or after January 1, 2014?

- Yes  
 No

Click "Next" to continue.

Cancel

Back

Next

New

### Common Tasks

- Start a new filing
- Start Data Reporting
- Submit a filing
- Review submitted filings
- Add to a submitted filing

### Other Places

- Filing workbench

## Section II: Contact Information

View the Universal Standardized Data Letter Instructions.

Please complete the required fields with a red star ( \* ). If you would like to use your account information, [click here](#) to use account information. To use contact information from a previously submitted filing, [click here](#) to use previous contact information.

### Filing Correspondence

**WARNING:** The Industry Portal (I-Portal) Account Email is the only email address that has been verified by our system. Any other email addresses entered below MUST be valid email addresses otherwise you will not receive any correspondence for this filing.

\* Preferred Email Address:  
(for all correspondence)

- I-Portal Account Email
- Filing Originator Email
- Company Contact Email
- Other



Additional Email Addresses:  
(separated by semicolons ";")



## Section III: General Information

View the Universal Standardized Data Letter Instructions.

- A. Do you currently have in force business on this plan of insurance in Florida?  Yes  No
- B. Are you currently selling this plan of insurance in other states?  Yes  No
- C. What market restrictions (such as available to military persons only) do you have on this form?

- D. Is this filing a resubmission of a previously disapproved, withdrawn, or incomplete filing?  Yes  No

If yes, provide Florida file log number:

- E. Type of company:  Profit  Non-Profit



Save

Cancel

Previous

Next



## Section IV: Life & Health Insurance

View the Universal Standardized Data Letter Instructions.

A. Your policy or coverage is (check one)

- Health  Life  Variable Life  Annuity  Variable Annuity

B. Your policy or coverage is (check one)

- Fraternal  Individual  Group

C. Group Policy Characteristics

1)  In-state

Out-of-state

2)  Large Group Only

Small Group Only (Major Medical - see section 627.6699, F.S.)

Small Group Only (Other than Major Medical)

Small and Large Groups (Other than Major Medical)

New



Next you need to select your Type of Insurance.

Make your selection, and click “Next”.

Depending on the type of filing being submitted, the wizard may skip the Type of Insurance and/or the Sub Type of Insurance screens.

That simply means there is only one option under that selection, and you will skip to the Filing Purpose screen to avoid repetition.

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

## Select the Type of Insurance

Please select one Type of Insurance for this filing. You are currently authorized to submit a filing for all the Type of Insurances that are **bold**. You may choose to create a filing for one of the unauthorized Types of Insurance, but you will not be able to submit your filing until you have the Office's authorization.

Click "Next" to continue.

**Select Type of Insurance**

- Annuities - Assumption Agreement (A01)
- Annuities - Other (A10)
- Individual Annuities - Deferred Non-Variable and Variable (A02.11)**
- Individual Annuities - Immediate Non-Variable and Variable (A06.11)**
- Individual Annuities - Special (A071)
- Individual Life - Endowment (L021)
- Individual Life - Flexible Premium Adjustable Life (L091)
- Individual Life - Term (L041)
- Individual Life - Whole (L071)
- Life - Assumption Agreement (L01)
- Life - Other (L08)

Cancel Back Next



**FLORIDA**  
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## Select the Sub Type of Insurance

Please select one Sub Type of Insurance for this filing. You are currently authorized to submit a filing for all the Sub Types of Insurance that are bold. You may choose to create a filing for one of the unauthorized Sub Types of Insurance, but you will not be able to submit your filing until you have the Office's authorization.

Click "Next" to continue.

Select Sub Type of Insurance

- Fixed Premium (A02.u.001)
- Flexible Premium (A02.11.002)
- limited Flexible Premium (A02.u.003)
- Modified Single Premium (A02.11.004)
- Single Premium (A02.11.003)

Now select the Sub Type of Insurance for the product being submitted. Once you do, click “Next”.




Home | Help | Contact: Us | **Account** | **Filing Search** | Logout



**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Addto a submitted filing

**Other Places**

- Filing workbench

## Select Filing Purpose

Select the purpose for this filing. Click "Next" to continue.

Please select the purpose for this filing. You are currently authorized to submit a filing for all the purposes that are bold. You may choose to create a filing for one of the unauthorized purposes, but you will not be able to submit your filing until you have the Office's authorization.

Forms Only

Forms & Rates

Here you will need to select your filing purpose. Do so, and click "Next".

The next screen provides one last chance to verify your selections. If they are correct, click “Continue”.

If you notice that one of your choices is incorrect, click “Cancel” to start over.

Keep in mind, any errors may result in your filing being returned as Incomplete. If you have any questions about your submission, contact staff by accessing one of the links provided.

The screenshot shows the Florida Office of Insurance Regulation website. The header includes the state name 'FLORIDA' and the 'OFFICE OF INSURANCE REGULATION' logo. A navigation bar contains links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled 'Filing Verification' and contains a paragraph of instructions. A sidebar on the left lists 'Common Tasks' and 'Other Places'. At the bottom right, there are 'Cancel' and 'Continue' buttons.

**FLORIDA**  
**OFFICE OF INSURANCE REGULATION**

Home Help Contact Us Account Filing Search Logout

**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Filing Verification**

Please be sure that the options identified below are correct for the type of product you are submitting for review. Any errors may result in the filing being closed and returned to you as **INCOMPLETE**. Incomplete filings will have to be recreated in I-File before being resubmitted for our review. If you have any questions regarding the appropriateness of your choices indicated below, please contact the Office [\(Contact Us\)](#) before continuing through this process. To speak with someone about your filing, please call one of the numbers listed [here](#).

**Area:** Life & Health  
**Line of Business:** Individual Life and/or Annuity Products  
**Type of Insurance:** Individual Annuities - Deferred Non-Variable and Variable  
**Sub Type of Insurance:** Flexible Premium  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium  
**Purpose:** Forms & Rates

If you are confident that the information above is correct, please click "Continue" to complete the filing creation process. Otherwise, click "Cancel" to start over.

Cancel Continue



**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

## New Filing Created

Congratulations, you have successfully started a new filing!

**Filing Details**

**Work Unit Number:** W05-192476  
**Filing Purpose:** Forms & Rates  
**Line of Business:** Individual Life and/or Annuity Products  
**Type of Insurance:** Individual Annuities - Deferred Non-Variable and Variable  
**Sub Type of Insurance:** Flexible Premium  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium  
**Component List:** LIFE & ANNUITIES FORM & RATE FILINGS  
**Date Created:** 11/3/2005 11:08:37 AM

Please assign an optional name and password to the filing to identify your filing while it is being assembled. When someone tries to access the filing using the information below, you will be notified by email.

**Filing Name (Optional):**

**Password (Optional):**

**Confirm Password:**

New FL OIR Industry Portal Filing Started - Message (HTML)

File Edit View Insert Format Tools Actions Help

Reply Reply to All Forward

From: [iportal@fldfs.com](mailto:iportal@fldfs.com) Sent: Thu 11/3/2005 11:09 AM  
 To: Patrick Lynch  
 Cc:  
 Subject: New FL OIR Industry Portal Filing Started

 **The Office of Insurance Regulation**

Congratulations, you have successfully started a new filing!

**Filing Details:**

**Work Unit Number:** W05-192476  
**Filing Purpose:** Forms & Rates  
**Line of Business:** Individual Life and/or Annuity Products  
**Type of Insurance:** Individual Annuities - Deferred Non-Variable and Variable  
**Sub Type of Insurance:** Flexible Premium  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium  
**Component List:** LIFE & ANNUITIES FORM & RATE FILINGS  
**Date Created:** 11/3/2005 11:08:37 AM

Your account information is listed below for future reference:

Your user name is: [Patrick.Lynch@fldfs.com](mailto:Patrick.Lynch@fldfs.com)  
 You selected your password at registration.

If you did not authorize this registration, someone has mistakenly registered using your e-mail address. We regret the inconvenience. Please forward this e-mail to [iportal@fldfs.com](mailto:iportal@fldfs.com) and write "cancel" in the subject line.

Once you've verified your choices, you then have the option of giving your filing a name and/or a password. You will also receive an email at this time containing the same information.

Once you click "Done", you will be taken to your Filing Workbench to upload documents and provide further information on your filing.

# Filing Workbench

Your Filing Workbench contains the filings (original and response) you have started but have not yet submitted.

To submit a filing you will need to complete a list of filing components. To access your filing's component list, click on the applicable Work Unit number in the first column.

You also have the ability to delete filings from your Workbench. Simply click "Delete Filing" and select the filing(s) you wish to delete one at a time.



## Common Tasks

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

## Other Places

- Filing workbench

## Filing Workbench

Below is a list of your filings that have not yet been submitted. Choose the one you wish to work on by clicking on its Work Unit Number.

### Choose a filing to work on

Work Unit Number/ File Log Number **	Filing Purpose	Product	Name	Type	Date Created
W05-157985	Multi-State	Fraternal Individual Annuities Deferred Variable Single Premium	MVA4 - Single Premium	Or	5/26/2005 02:07:43 PM
W05-186972	Rates Only	Private Passenger Auto	ARC Test	Or	7/6/2005 02:19:31 PM
W05-187106	Forms Only	Individual Nonvariable Annuities Deferred Fixed Premium		Or	7/7/2005 10:33:34 AM
W05-171427	Forms Only	Discount Medical Plan		Or	7/28/2005 02:25:01 PM
W05-178103	Multi-State	Variable Individual Annuities Deferred Flexible Premium		Or	8/19/2005 02:40:46 PM
W05-188105	Rate & Rule	Homeowners Multi-Peril		Or	10/5/2005 01:47:34 PM
W05-188847	Multi-State	Variable Individual Annuities Deferred Fixed Premium	Test	Or	10/18/2005 02:15:14 PM
W05-190506	Forms Only	Individual Nonvariable Annuities Deferred Flexible Premium	Flexible Premium - Form ABC-123FL	Or	11/2/2005 09:57:13 AM
W05-191831	Rates Only	Health Maintenance Organization Group Conversion	I-File ITS Issue # 45240	Or	11/1/2005 01:58:02 PM
W05-192450	Forms Only	Group Nonvariable Annuities Deferred Flexible Premium		Or	11/3/2005 10:31:51 AM
W05-192476	Forms & Rates	Individual Nonvariable Annuities Deferred Flexible Premium	ANN-123 Filing	Or	11/3/2005 11:08:37 AM

Or = Original Filing  
 Re = Response Filing  
 \*\* Will only appear for Response Filing

Delete Filing

# Filing Component List

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Filing Component List**

**Work Unit Number:** W05-192476  
**Name:** ANN-123 Filing  
**Purpose:** Forms & Rates  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium  
[edit filing details](#)

Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
Company Data	11/3/2005 11:08	Incomplete
Actuarial Memorandum Life Actuarial Memorandum	11/3/2005 11:08	Incomplete
Cover Letter	11/3/2005 11:08	Incomplete
DIR-B2-1507 L&H Universal Standardized Data Letter	11/3/2005 11:08	Incomplete
Forms Checklist	11/3/2005 11:08	Incomplete
Forms to be Reviewed	11/3/2005 11:08	Incomplete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/3/2005 11:08	-----
Rate Pages (Optional)	11/3/2005 11:08	-----
Supplementary Information (Optional) Supplementary Documentation	11/3/2005 11:08	-----

[Review this Filing](#) [Return to Workbench](#)

The Filing Component List contains required and optional filing components. The required components are initially marked as “Incomplete” in the Status column. As you complete each required component, the Status column will change to “Complete”.

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OFFICE OF INSURANCE REGULATION

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Filing Component List**

**Work Unit Number:** W05-192476  
**Name:** ANN-123 Filing  
**Purpose:** Forms & Rates  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium  
[edit filing details](#)

Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
<a href="#">Company Data</a>	11/3/2005 11:08	Incomplete
Actuarial Memorandum Life Actuarial Memorandum	11/3/2005 11:08	Incomplete
Cover Letter	11/3/2005 11:08	Incomplete
OIR-B2-1507 L&H Universal Standardized Data Letter	11/3/2005 11:08	Incomplete
Forms Checklist	11/3/2005 11:08	Incomplete
Forms to be Reviewed	11/3/2005 11:08	Incomplete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/3/2005 11:08	-----
Rate Pages (Optional)	11/3/2005 11:08	-----
Supplementary Information (Optional) Supplementary Documentation	11/3/2005 11:08	-----

[Review this Filing](#) [Return to Workbench](#)

To access individual components, click the links in the “Component” column.

Within a Filing Component list, you also have the option to “Review this Filing” (view an HTML document of data gathered during the filing creation process) and “Return to Workbench”.

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Company Data**

Please verify that the selected company's details are correct. This component cannot be completed until the all companies are authorized. Please click "Return to Component List" when finished.

If you have questions regarding the information being requested, please consult our website at [www.fldfs.com](http://www.fldfs.com) or contact us at (850)413-3152 (Forms) or (850)413-3151 (Rates).

**Company Details**

Company Name	FEIN	NAIC CC	NAIC GC	Status
PRUCO LIFE INSURANCE COMPANY	221944557	79227	0304	<b>AUTHORIZED</b>

Return to Component List

Here you need to verify that this is the company on whose behalf you are filing and that the company is authorized to make this submission. If you're satisfied with your selection, click "Return to Component List". If you have questions about an authority status or anything else regarding your filing, view the website or contact staff listed above.

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Filing Component List**

Work Unit Number: W05-192476  
 Name: ANN-123 Filing  
 Purpose: Forms & Rates  
 Product: Individual Nonvariable Annuities Deferred Flexible Premium  
[edit filing details](#)

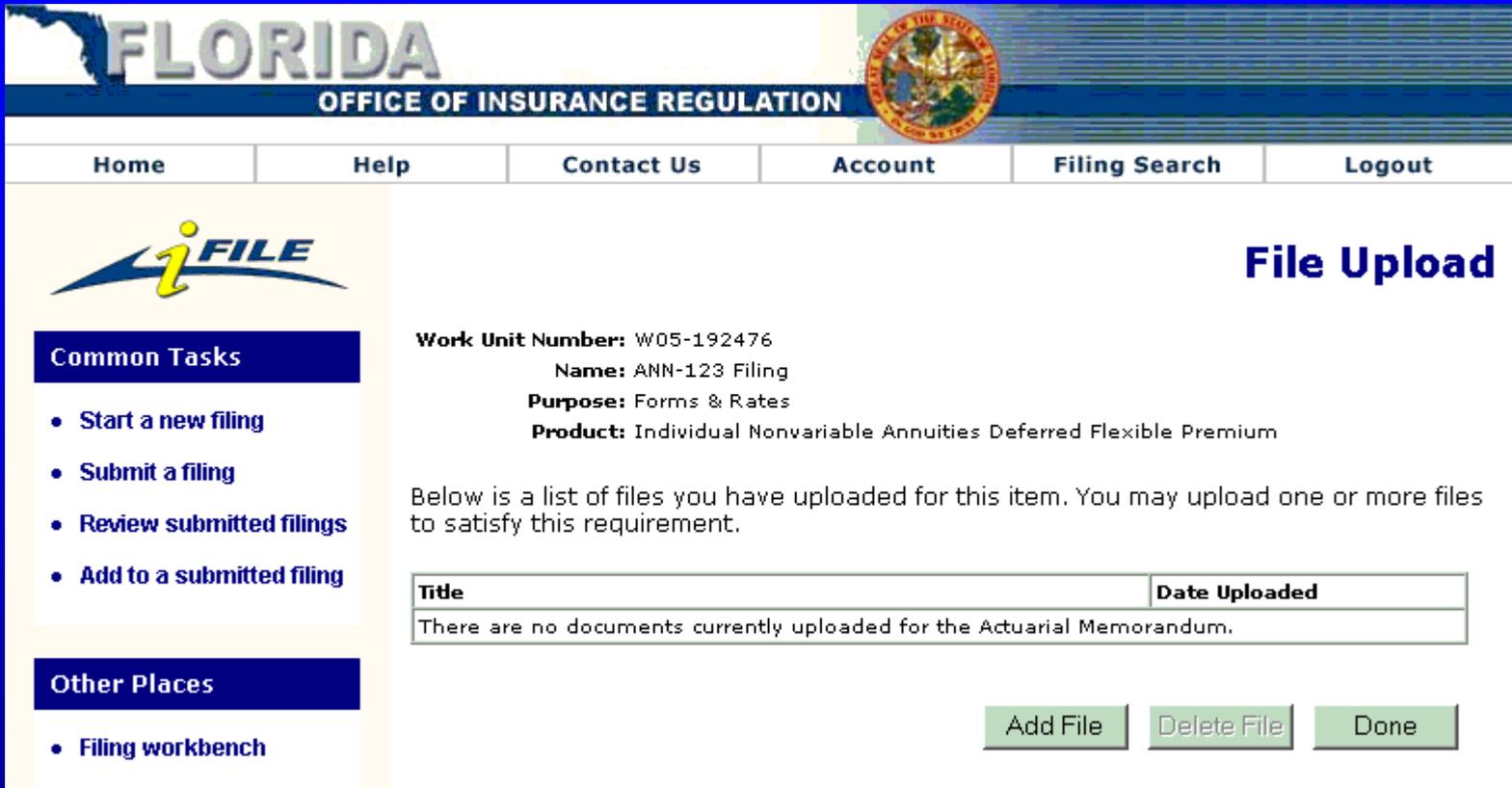
Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
Company Data	11/3/2005 15:05	Complete
<a href="#">Actuarial Memorandum</a> Life Actuarial Memorandum	11/3/2005 11:08	Incomplete
Cover Letter	11/3/2005 11:08	Incomplete
OIR-B2-1507 L&H Universal Standardized Data Letter	11/3/2005 11:08	Incomplete
Forms Checklist	11/3/2005 11:08	Incomplete
Forms to be Reviewed	11/3/2005 11:08	Incomplete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/3/2005 11:08	-----
Rate Pages (Optional)	11/3/2005 11:08	-----
Supplementary Information (Optional) Supplementary Documentation	11/3/2005 11:08	-----

[Review this Filing](#) [Return to Workbench](#)

Notice that the Company Data component now reads "Complete".

Click the next component in the list to continue.



The image shows a screenshot of the Florida Office of Insurance Regulation's iFILE web application. At the top, there is a header with the word "FLORIDA" in large letters, the state seal, and the text "OFFICE OF INSURANCE REGULATION". Below this is a navigation bar with links for "Home", "Help", "Contact Us", "Account", "Filing Search", and "Logout".

The main content area is titled "File Upload". On the left side, there is a sidebar with a logo for "iFILE" and two sections: "Common Tasks" and "Other Places".

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

The main content area displays the following information:

**Work Unit Number:** W05-192476  
**Name:** ANN-123 Filing  
**Purpose:** Forms & Rates  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Below is a list of files you have uploaded for this item. You may upload one or more files to satisfy this requirement.

Title	Date Uploaded
There are no documents currently uploaded for the Actuarial Memorandum.	

At the bottom right of the main content area, there are three buttons: "Add File", "Delete File", and "Done".

Now you need to upload an Actuarial Memorandum. Click "Add File" to search your computer for the necessary document. Click "Done" to return to your Filing Component list.

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

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**iFILE**

**File Upload**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Work Unit Number:** W05-192476  
**Name:** ANN-123 Filing  
**Purpose:** Forms & Rates  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Select the file you wish to include with this filing component. To choose a file, click Browse. Navigate to the location of the file on your computer, and click Open. After you have selected the file you wish to upload, click Upload. If you do not wish to upload any files, click Cancel.

**Files must be less than ten Megabytes (10,000 Kilobytes) and 1000 pages in size.**

Please select the file you wish to upload as your Actuarial Memorandum:

Title

File to upload

Please note the I-File document requirements.

**I-File will accept the following document types:**

-Hyper Text Markup (.htm)

-Hyper Text Markup Language (.html)

-Portable Document Format (.pdf)

-Text File (.txt)

-Microsoft Word (.doc)

-Rich Text Format (.rtf)

-Microsoft Excel (.xls)

-Tagged Image File Format (single page only) (.tif / .tiff)

Clicking “Add” brings you to the screen above. Notice, I-File already includes “Actuarial Memorandum” as the title of your document. You may change that if you wish.

Home | Help | Contact Us | Act

**FIL**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Work Unit Number: WOS-19 2476  
 Name: ANN-123 Filing  
 Purpose: Forms & Rates  
 Product: Individual Nonvariab

Select the file you wish to include will Browse. Navigate to the location of the file you wish to upload, click Open. If you do not wish to upload any files, click Cancel.

Files must be less than ten Megabytes (10,000 Kilobytes) and 1000 pages in size.

Please select the file you wish to upload as your Actuarial Memorandum:

Title: )\$!1\_11€118\$1il•Jl-lll,ftM

File to upload:

**Choose file**

Demo Material

04-03653- Annuity Investors - ACK.doc	Forms-FLA 04-03655- .doc
04-03655- Annuity Investors - APPROVAL.doc	!-File & Workflow links.doc
04-03655- Annuity Investors- CLAR.doc	1-FRe Emails.doc
	JWFS URLs.doc
Annuity Contract .doc	life Insurance Policy . doc
annuity investors annuity contract (stamped).pdf	MAPP endorsement.doc
annuity investors cover letter (stamped).pdf	nonforfeiture standards.doc
Back Office Data to Front Office Reporting.pps	valuation standards.doc
Cover Letter.doc	
EDMS Workflow User Guide2 vS.doc	
EDMS Workflow User Guide2 vS.ip	

File name: !Act Memodoc

Files of type: All Files (\*.\*)

Clicking “Browse” brings up the window shown above. Locate the document you wish to upload and click “Open”.

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**...A<sup>o</sup> FILE.** **File Upload**

**Common Tasks**

- start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

Work Unit Number: W05-192476  
Name: ANN-123 Filing  
Purpose: Forms & Rates  
Product: Individual Nonvariable Annuities Deferred Flexible Premium

Select the file you wish to include with this filing component. To choose a file, click Browse. Navigate to the location of the file on your computer, and click Open. After you have selected the file you wish to upload, click Upload. If you do not wish to upload any files, click Cancel.

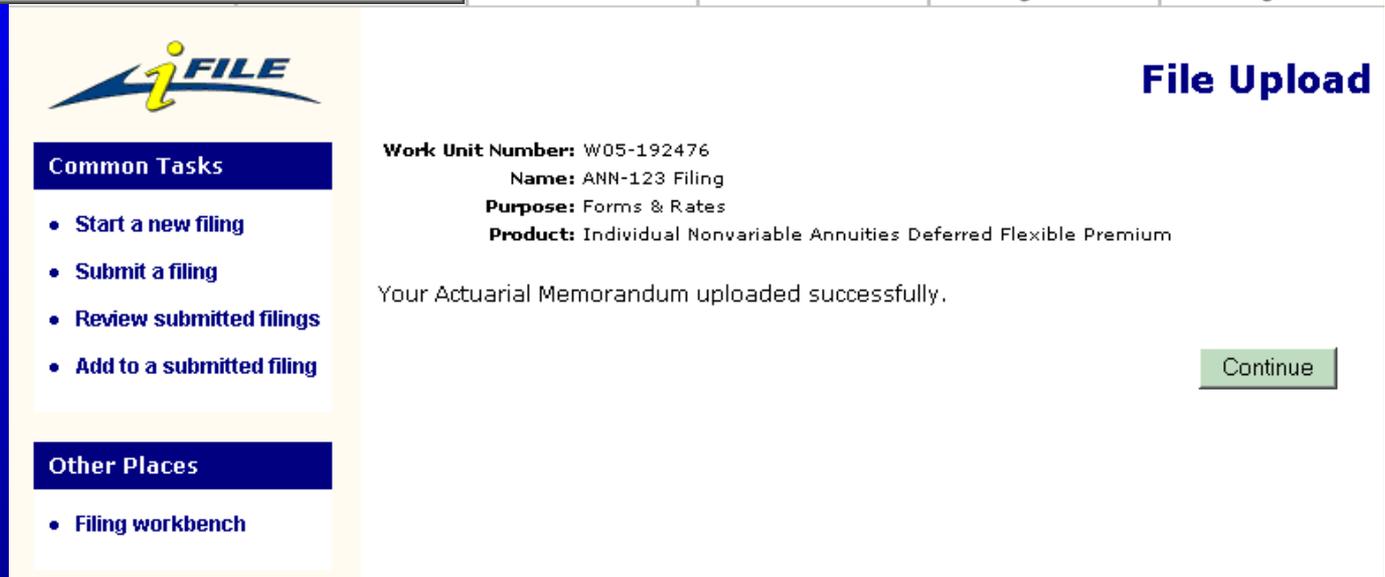
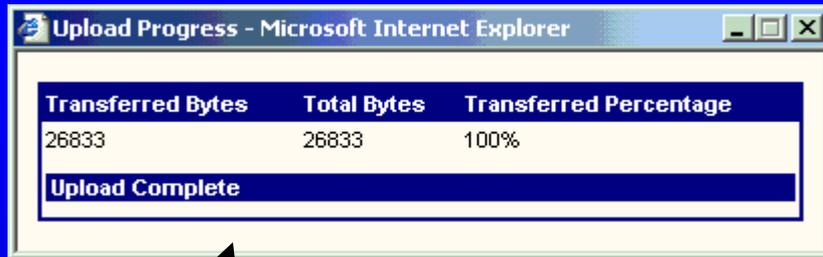
Files must be less than ten Megabytes (10,000 Kilobytes) and 1000 pages in size.

Please select the file you wish to upload as your Actuarial Memorandum:

Title

File to upload

View the “File to upload” window to verify that you’ve attached the correct document. Then click “Upload”.



As your document uploads, a progress window will appear.

After the upload is complete, the page above will display. Click “Continue”.

If you have trouble uploading your document, click the “Contact Us” option for assistance.

You also have the option of viewing the document you upload. To do so, click the link in the “Title” column, and then click the icon/link to your document on the following screen.

**FLORIDA**  
**OFFICE OF INSURANCE REGULATION**

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**File Upload**

**Work Unit Number:** W05-192476  
**Name:** ANN-123 Filing  
**Purpose:** Forms & Rates  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Below is a list of files you have uploaded for this item. You may upload one or more files to satisfy this requirement.

Title	Date Uploaded
<a href="#">Actuarial Memorandum</a>	11/4/2005

Title: Actuarial Memorandum  
Current File: Act Memo.doc

If you need to upload an additional actuarial memorandum, click “Add File” and follow the previous steps. If you realized you attached the wrong document, click “Delete File”, select the file to be deleted, and click “Delete”. If you’re finished, click “Done”.

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OFFICE OF INSURANCE REGULATION

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*FILE.*

### Filing Component List

Work Unit Number: W05-192476  
 Name: ANN-123 Filing  
 Purpose: Forms & Rates  
 Product: Individual Nonvariable Annuities Deferred Flexible Premium  
**matnr.UM!AftUD**

Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
Company Data	11/3/2005 15:05	Complete
Actuarial Memorandum Life Actuarial Memorandum	11/4/2005 10:43	Complete
Cover Letter	11/3/2005 11:08	Incomplete
DIR-B2-1507 Life Universal Standardized Data Letter	11/3/2005 11:08	Incomplete
Forms Checklist	11/3/2005 11:08	Incomplete
Forms to be Reviewed	11/3/2005 11:08	Incomplete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	-----
Certification Statement: forfeiture Standards (Optional)	11/3/2005 11:08	-----
Rate Pages (Optional)	11/3/2005 11:08	-----
Supplementary Information (Optional) Supplementary Documentation	11/3/2005 11:08	-----

Review this Filing | Return to Workbench

The Actuarial Memorandum component now reads "Complete".

Click the next component in the list to continue.



### Common Tasks

- [Start a new filing](#)
- [Submit a filing](#)
- [Review submitted filings](#)
- [Add to a submitted filing](#)

### Other Places

- [Filing workbench](#)

## File Upload

**Work Unit Number:** W05-192476

**Name:** ANN-123 Filing

**Purpose:** Forms & Rates

**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Below is a list of files you have uploaded for this item. You may upload one or more files to satisfy this requirement.

Title	Date Uploaded
There are no documents currently uploaded for the Cover Letter.	

[Add File](#)[Delete File](#)[Done](#)

You need to upload a cover letter to your filing. Just as you did for the actuarial memorandum, click “Add File”.

**FILE!**

**Common Tasks**

- start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Work Unit Number: W05-192476  
 Name: ANN-123 Filing  
 Purpose: Forms S. Rates  
 Product: Individual Nonvariable Annu

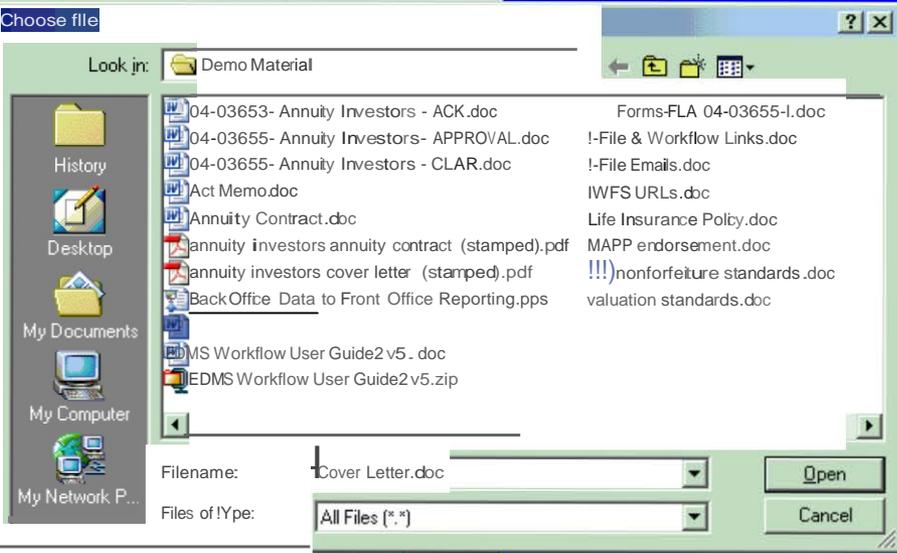
Select the file you wish to include with this filing. Navigate to the location of the file you wish to upload, click the file, click Cancel.

Files must be less than ten Megabytes (10 MB)

Please select the file you wish to upload at this time.

Title

File to upload



Click Browse to locate the document you wish to upload, and then click “Open”.

The screenshot shows the iFILE File Upload interface. At the top, there is a navigation bar with links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area features the iFILE logo and a 'File Upload' heading. On the left, there are sections for 'Common Tasks' and 'Other Places'. The main content area displays filing details: Work Unit Number: W05-192476, Name: ANN-123 Filing, Purpose: Forms & Rates, and Product: Individual Nonvariable Annuities Deferred Flexible Premium. Below this, there is a paragraph of instructions on how to select a file for upload. A file selection form is present with a 'Title' field containing 'jcover Letter' and a 'File to upload' field containing a file path. At the bottom right, there are 'Cancel' and 'Upload' buttons.

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**iFILE** **File Upload**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Work Unit Number: W05-192476  
Name: ANN-123 Filing  
Purpose: Forms & Rates  
Product: Individual Nonvariable Annuities Deferred Flexible Premium

Select the **file** you wish to include with this filing component. To choose a file, click **Browse**. Navigate to the location of the file on your computer, and click **Open**. After you have selected the file you wish to upload, click **Upload**. If you do not wish to upload any files, click **Cancel**.

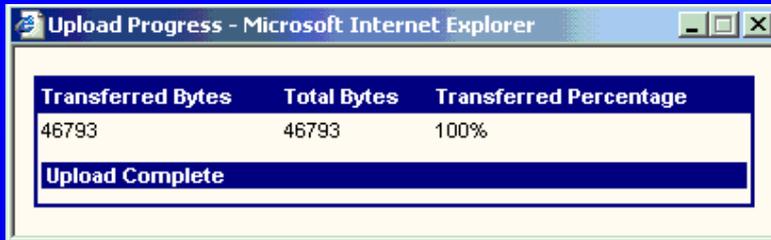
Files must be less than ten Megabytes ( 10,000 Kilobytes) and 1000 pages in size.

Please select the file you wish to upload as your Cover Letter:

Title

File to upload  [Browse..](#)

View the “File to upload” window to verify that you’ve attached the correct document. Then click “Upload”.



DEPARTMENT OF INSURANCE REGULATION

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## File Upload

**Work Unit Number:** W05-192476  
**Name:** ANN-123 Filing  
**Purpose:** Forms & Rates  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Your Cover Letter uploaded successfully.

Continue

As your document uploads, a progress window will appear.

After the upload is complete, the page above will display. Click “Continue”.  
If you have trouble uploading your document, click the “Contact Us” option for assistance.



The image shows a screenshot of the Florida Office of Insurance Regulation's iFILE web application. The header features the Florida state logo and the text "FLORIDA OFFICE OF INSURANCE REGULATION". A navigation bar includes links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled "File Upload" and displays details for a specific filing: Work Unit Number W05-192476, Name ANN-123 Filing, Purpose Forms & Rates, and Product Individual Nonvariable Annuities Deferred Flexible Premium. A list of uploaded files is shown in a table, with one entry: "Cover Letter" uploaded on "11/4/2005". Below the table are three buttons: "Add File", "Delete File", and "Done".

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OFFICE OF INSURANCE REGULATION

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**iFILE**

**File Upload**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Work Unit Number:** W05-192476  
**Name:** ANN-123 Filing  
**Purpose:** Forms & Rates  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Below is a list of files you have uploaded for this item. You may upload one or more files to satisfy this requirement.

Title	Date Uploaded
Cover Letter	11/4/2005

Add File Delete File Done

If you need to upload an additional cover letter, click “Add File” and follow the previous steps. If you realized you attached the wrong document, click “Delete File”, select the file to be deleted, and click “Delete”. If you’re finished, click “Done”.

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**iFILE**

**Filing Component List**

Work Unit Number: W05-192476  
Name: ANN-123 Filing  
Purpose: Forms & Rates  
Product: Individual Nonvariable Annuities Deferred Flexible Premium  
**d!h1bii.JJMjNmd**

Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
Company Data	11/3/2005 15:05	Complete
Actuarial Memorandum Life Actuarial Memorandum	11/4/2005 10:43	Complete
Cover Letter	11/4/2005 11:12	Complete
<a href="#">QIR-B2-1507</a> L&H Universal Standardized Data Letter	11/3/2005 11:08	Incomplete
Forms Ched-list	11/3/2005 11:08	Incomplete
Formsto be Reviewed	11/3/2005 11:08	Incomplete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	
Certification State:ment: Nonforfeiture Standards (Optional)	11/3/2005 11:08	
Rate Pages(Optional)	11/3/2005 11:08	
Supplementary Information (Optional) Supplementary Documentation	11/3/2005 11:08	

Review this Filing | Return to Workbench

The Cover Letter component now reads "Complete".

Click the next component in the list to continue.

The first screen displays the instructions for completing the form.

If you have any questions about filling out the UDL, view the online instructions, visit the website listed or contact the numbers provided.

Note the navigation instructions posted to avoid errors while using I-File.

Click “Next” to proceed, or “Cancel” to return to your Filing Component List.

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**L&H Universal Data Letter**

**Filing:** W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

**Section I: Instructions and Information**

This online form must accompany all Life & Health Form or Rate filings submitted to the Office. If you have questions regarding the information requested, please consult our website at [www.fldfs.com](http://www.fldfs.com) or contact us at (850)413-3152 (Forms) or (850)413-3151 (Rates).

[View the Universal Standardized Data Letter Instructions.](#)

The purpose of this filing is *Forms & Rates*.

**Navigation**

**Save** Click the 'Save' button to save the information on the current page and return to component list page.

**Cancel** Click the 'Cancel' button to return to the component list page and abandon all changes on the current page.

**Previous** Click the 'Previous' button to save the information on the current page and return to the preceding page.

**Next** Click the 'Next' button to save the information on the current page and proceed to next page.

Please click "Next" to continue to Section II of the L&H Universal Data Letter.

You need to provide contact information for the filing. In addition to filling out the form manually, you have the option to use your account information or contact information from a previous submission.

Complete the form, filling in at least the required information.

The screenshot shows the Florida Office of Insurance Regulation's iFILE system. At the top, there is a navigation bar with links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled "L&H Universal Data Letter" and includes a filing number: W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium). The form is divided into sections, with "Section II: Contact Information" being the current focus. Below this section, there are instructions and a form titled "Filing Originator Information" with several input fields for contact details.

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Originator Tasks**

- Use account contact info
- Re-use previous contact info

**L&H Universal Data Letter**

**Filing:** W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

**Section II: Contact Information**

View the Universal Standardized Data Letter Instructions.

Please complete the required fields with a red star ( \* ). If you would like to use your account information, [click here](#) to use account information. To use contact information from a previously submitted filing, [click here](#) to use previous contact information.

**Filing Originator Information**

Company E-Mail:

---

\*Contact Name:

Contact Title:

Professional Designation:

\*Contact E-mail:

## L&H Universal Data Letter

**Filing:** W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

### Section II: Contact Information

View the Universal Standardized Data Letter Instructions.

Please complete the required fields with a red star ( \* ). If you would like to use your account information, [click here](#) to use account information. To use contact information from a previously submitted filing, [click here](#) to use previous contact information.

#### Filing Originator Information

Company E-Mail:

Choosing the “previous contact” option brings you to the following page. Select the Originator / Contact combination you want, and click “Use Originator”

The screenshot shows the Florida Office of Insurance Regulation iFILE system interface. At the top, there is a navigation bar with links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled "L&H Universal Data Letter" and displays the filing information: "Filing: W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)". Below this, there is a section titled "Use Previous Contact Information" with the instruction: "Select a previously used contact. The data contained within that contact will be used for this filing." A table lists the available contacts:

	Filing Originator Name	Company Contact Name	Date Created
<input checked="" type="radio"/>	Patrick Lynch	Patrick Lynch	10/5/2005 1:48:04 PM

At the bottom right of the table, there are two buttons: "Cancel" and "Use Originator". On the left side of the page, there is a sidebar with "Common Tasks" (Start a new filing, Submit a filing, Review submitted filings, Add to a submitted filing) and "Other Places" (Filing workbench).

In addition to a Filing Originator, you need to designate a Company Contact. This contact will be the one to receive correspondence from the Office.

Click “Copy” to copy the Filing Originator information, or enter another user’s information.

**Company Contact Information**

Click on Copy To Use Filing Originator Information for Company Contact

---

Company E-Mail:

---

\*Contact Name:

Contact Title:

Professional Designation:

\*Contact E-mail:

Once you’ve finished entering information, click “Save” to save your progress and continue at a later date. Click “Cancel” to return to the Filing Component List, “Previous” to return to the prior screen, or “Next” to continue.

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**iFILE**

**Common Tasks**

- start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**L&H Universal Data Letter**

Filing: W05-192476 (Forms & Rates- Individual Nonvariable Annuities Deferred Flexible Premium)

**Section III: General Information**

View the Universal Standardized Data Letter Instructions.

A. Do you currently have in force business on this plan of insurance in Florida? r.' Yes No

B. Are you selling new business on this plan of insurance in Florida? r.' Yes No

If no, date discontinued:

C. Are you currently selling this plan of insurance in other states? r.' Yes No

D. What market restrictions (such as available to military persons only) do you have on this form?

Answer the questions in Section III, and click “Next” to continue.

## L&H Universal Data Letter

Filing: W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

### Section IV: Life & Health Insurance

View the Universal Standardized Data Letter Instructions.

A. Your policy or coverage is (check one)

Health  Life  Variable Life  Annuity

B. Your policy or coverage is (check one)

Fraternal  Individual  Group

C. Group Policy Characteristics

1)  In-state

Out-of-state

2)  Large Group

Small Group (see section 627.6699, F.S.)

3)  Employee Group

Labor Union Group

Debtor Group

Association Group

Additional Group

Other (specify) \_\_\_\_\_

4)  Blanket Health Policy

Franchise Health Policy

A group to cover persons associated in any other common group, which common group is formed primarily for purposes other than providing insurance

A group which is established primarily for the purpose of providing group insurance

A group of insurance agents of an insurer, which insurer is the policyholder

Other (specify) \_\_\_\_\_

D. Individual Policy Characteristics

1.  Optional Renewable

2.  Conditionally Renewable

3.  Guaranteed Renewable

4.  Non-cancelable

5.  Non-renewable

6.  Other \_\_\_\_\_

E. Is your policy or Coverage primarily for individuals over 65?

Yes  No

F. Check the types of benefit(s) your policy or coverage provides:

1.  Disability Income

2.  Major Medical

3.  Long Term Care

4.  Prepaid Limited Health Service Organization

5.  Medicare Supplement

6.  Small Employer Group Coverage (see section 627.6699, F.S.)

7.  Health Maintenance Organization

8.  Other (specify) \_\_\_\_\_

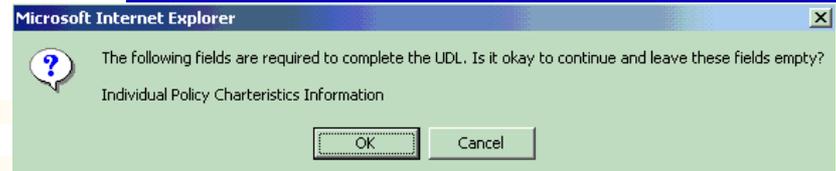
Save

Cancel

Previous

Next

Complete Section IV by reviewing the information provided and filling in anything additional that needs to be noted. Click “Next” at the bottom of the screen to continue.



(You will receive the message above if you do not include any Individual Policy Characteristics. If none are necessary, click “Ok”. Otherwise, click “Cancel” to return to the form and enter the information.)



**L&H Universal Data Letter**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Filing: W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

**Section V: Rate Filing History - Including Annual Rate Certifications**



**L&H Universal Data Letter**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Filing: W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

**Section VI: Rate Request By Form**

View the Universal Standardized Data Letter Instructions.

(To be completed for all filings which include pooled blocks - Florida only) [View the Universal Standardized Data Letter Instructions.](#)

**Primary Form**

Form Number	Rate Change Requested	Total Annualized Premium Volume	# of Certificates or Policies
<input type="text"/>	<input type="text"/> %	\$ <input type="text"/>	<input type="text"/>

**Additional Forms**

Form Number	Rate Change Requested	Total Annualized Premium Volume	# of Certificates or Policies
<input type="text"/>	<input type="text"/> %	\$ <input type="text"/>	<input type="text"/>

Delete Checked

Save Cancel Previous

**L&H Universal Data Letter**

Filing: W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

**Section VII: Additional Data For New Form & Rate Filings**

(Provide current data for the form(s) submitted)

	Florida Only		Nationwide	
A. Number of Certificates or Individual Policies Affected:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B. If Group, Average Number of Certificates Per Policy/ Participating Unit (e.g. Employer Unit)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C. Annualized Premium Volume	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
D. Average Annual Premium (current / proposed or new form)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
E. Anticipated Loss Ratio (current / proposed premium)	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
F. Lifetime Loss Ratio (current / proposed premium)	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
G. Loss Ratio Standard for The Form (or pooled group/forms)	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
H. Total Past Incurred Loss Ratio Without Active Life Reserve Increases	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %
I. Current Year Loss Ratio for Policies 3 Years & Older (for med. supp.) Without Policy Reserves:	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %	<input type="text"/> %

Save Cancel Previous Next

You'll then be asked to complete a series of screens containing rate information.

The final screen of the UDL contains the applicable certifications.

To complete, click your mouse in the empty checkboxes to the left of the certification, and provide the correct information below.

When you get to the bottom of the page, you'll notice that "Next" is no longer an option. Click "Save" to finish the form and return to your Filing Component List.

## L&H Universal Data Letter

**Filing:** W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

View the Universal Standardized Data Letter Instructions.

Fields marked with a red star ( \* ) are required. Please check that you have read and understood the certification statement and typed your full name and title.

### Section VIII: Rate Filing Certification

\*  I certify that I am authorized to make this Rate Filing on behalf of the company, further that the information contained in related transmittals and the filing is true, complete, correct, and in compliance with all applicable state laws. I certify that the proposed premiums are reasonable in relationship to the benefits provided.

(Check one)

I am an actuary

I am not an actuary

\*Name:

\*Title:

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**iFILE**

**Filing Component List**

Work Unit Number: W05-192476  
Name: ANN-123 Filing  
Purpose: Forms & Rates  
Product: Individual Nonvariable Annuities Deferred Flexible Premium  
Albibi,Hii@Mlft

Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing",

Component	Last Updated	Status
Company Data	11/3/2005 15:05	Complete
Actuarial Memorandum Life Actuarial Memorandum	11/4/2005 10:43	Complete
Cover Letter	11/4/2005 11:12	Complete
OIR-B2-1507 L&H Universal Standardized Data Letter	11/7/2005 15:24	Complete
<u>Forms Checklist</u>	11/3/2005 11:08	Incomplete
Forms to be Reviewed	11/3/2005 11:08	Incomplete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/3/2005 11:08	-----
Rate Pages (Optional)	11/3/2005 11:08	-----
Supplementary Information (Optional) Supplementary Documentation	11/3/2005 11:08	-----

Review this Filing Return to Workbench

The OIR-B2-1507 component now reads "Complete".

Click the next component in the list to continue.



# FLORIDA

## OFFICE OF INSURANCE REGULATION

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## Edit Form Checklist

**Common Tasks**

- start a new filing
- Submit a filing
- Review submitted filings
- Addto a submitted filing

Work Unit Number: W05-192476  
 Name: ANN-123 Filing  
 Purpose: Forms & Rates  
 Product: Individual Nonvariable Annuities Deferred Flexible Premium

Below is a list of Form checklists you have created. You may create one or more Form checklists to satisfy this requirement.

Form Checklist #	Checklist Description
There are no Form Checklists currently associated with this product at this time. Please click on button Add Checklist to add checklist.	

**Other Places**

- Filing workbench

Cancel | Add Checklist | Delete Checklist | Done

To add one or more checklist to your filing, click the “Add Checklist” button.

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## Select Checklist

Select a Checklist:

- INDIVIDUAL NON-VARIABLE ANNUITY POLICY
- INDIVIDUAL FIXED ANNUITY APPLICATION
- ENDORSEMENT, AMENDMENTS, RIDERS

Cancel Next

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

You will be presented a product-specific list of checklists from which to choose. Select the appropriate checklist, and click “Next”.

## INDIVIDUAL NON-VARIABLE ANNUITY POLICY

Statute/Rule	Description	Yes	No	N/A
627.4145	Readability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.482(1)	Statutory Required interest payable on surrender proceeds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
95.11(2)(b)	Legal actions limitation not less than 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.4131	Telephone number on face and purpose.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.462	If the policy provides for installment payment of proceeds, an installment table shall be included, along with a precise description of the actuarial basis.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.416	Form must contain signature of officer of the company.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4-223.023(2)(b)	Bank Disclosure language and symbols	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.474	Entire contract.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.472	Incontestability after reinstatement limited to 2 years.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.470	Reinstatement. One year and 6% maximum interest on payments and indebtedness.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.469	Dividends. (if a participating contract) end of 3rd year.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.468	Misstatement of age or sex (the amount payable shall equal what the premium would have purchased using correct information.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.467	Entire Contract; policy and application.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.466	Incontestability (After 2 years from issue date)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.413(1)	Required policy contents, including form number.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.413(4)	Contractual provisions may not be signified as variable (i.e. may not be bracketed). Certain items that are variable by nature (i.e. current interest rates, officer's signature) may be indicated as variable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.803	Contract must contain, on the first page in contrasting color or bold face type, a clear statement that benefits are on a variable or indeterminate basis, may increase or decrease, and are not guaranteed as to fixed dollar amount.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.465	Grace Period (30 days; optional 6% maximum interest charge for late payments.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
626.99(4)(a)	10 day free look. Unconditional refund. (Not applicable to variable life policies.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="button" value="Cancel"/> <input type="button" value="Reset"/> <input type="button" value="Save"/> <input type="button" value="Change Checklist"/>				

Each checklist item includes the applicable Florida Statute/Rule reference.

The Office's analysts will use the same set of standards when reviewing your filing for approval. To expedite the review process, please ensure that your forms comply with these standards before submitting.

Click the applicable "Yes, No, N/A" buttons to complete your checklist.

Select "Cancel" to return to the Filing Component List, "Reset" to clear your checklist selections, "Save" to complete your checklist, and "Change Checklist" to select a different checklist.

Your checklist component will not read “Complete” unless all standards are addressed.

## INDIVIDUAL NON-VARIABLE ANNUITY POLICY

Statute/Rule	Description	Yes	No	N/A
627.4145	Readability	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.482(1)	Statutory Required interest payable on surrender proceeds	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
95.11(2)(b)	Legal actions limitation not less than 5 years	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.4131	Telephone number on face and purpose.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.462	If the policy provides for installment payment of proceeds, an installment table shall be included, along with a precise description of the actuarial basis.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.416	Form must contain signature of officer of the company.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4-223.023(2)	Bank Disclosure Language and symbols	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
	2 years.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
	interest on	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
	third year.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
	table shall equal	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
	what the premium would have purchased using correct information.)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.467	Entire Contract; policy and application.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.466	Incontestability (After 2 years from issue date)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.413(1)	Required policy contents, including form number.	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
627.413(1)	Contractual provisions may not be signified as variable (i.e. may not be bracketed). Certain items that are variable by nature (i.e. current interest rates, officer's signature) may be indicated as variable.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.803	Contract must contain, on the first page in contrasting color or bold face type, a clear statement that benefits are on a variable or indeterminate basis, may increase or decrease, and are not guaranteed as to fixed dollar amount.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
627.465	Grace Period (30 days; optional 6% maximum interest charge for late payments.)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
626.99(4)(a)	10 day free look. Unconditional refund. (Not applicable to variable life policies.)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Microsoft Internet Explorer

All checklist items must be filled to complete the check list. Is it okay to continue and leave these fields empty?

OK Cancel

The unanswered item(s) will be indicated by a shaded background in the “Yes, No, N/A” area. Fill in what you missed, and click “Save”.

## Checklist Data

Checklist Data Saved Successfully.

[Return to Edit Form Checklist](#)



OFFICE OF INSURANCE REGULATION

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### Common Tasks

- [Start a new filing](#)
- [Submit a filing](#)
- [Review submitted filings](#)
- [Add to a submitted filing](#)

### Other Places

- [Filing workbench](#)

**Work Unit Number:** W05-192476

**Name:** ANN-123 Filing

**Purpose:** Forms & Rates

**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Below is a list of Form checklists you have created. You may create one or more Form checklists to satisfy this requirement.

Form Checklist #	Checklist Description
Form Checklist 1	Individual Non-Variable Annuity Policy

[Cancel](#)

[Add Checklist](#)

[Delete Checklist](#)

[Done](#)

Click the button on the next page to return to the Edit Form Checklist screen.

Click “Cancel” to return to your Filing Component List, “Add Checklist” to add an additional checklist, “Delete Checklist” to delete a selected checklist, or “Done” to confirm your checklist.

## Confirm Form Checklist

**Work Unit Number:** W05-192476

**Name:** ANN-123 Filing

**Purpose:** Forms & Rates

**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Below is a list of Form checklist and detail data you have created. Click "Cancel" go to Edit Form Checklist, or click "Done" go to Filing Component List.

### Review Standards Checklist 1

Checklist Description:		Individual Non-Variable Annuity Policy		
Statute/Rule	Description	Yes	No	N/A
627.4145	Readability	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.482(1)	Statutory Required interest payable on surrender proceeds	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
95.11(2)(b)	Legal actions limitation not less than 5 years	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.4131	Telephone number on face and purpose.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.462	If the policy provides for installment payment of proceeds, an installment table shall be included, along with a precise description of the actuarial basis.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.416	Form must contain signature of officer of the company.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4-223.023(2)(b)	Bank Disclosure language and symbols	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.474	Entire contract.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.472	Incontestability after reinstatement limited to 2 years.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.470	Reinstatement. One year and 6% maximum interest on payments and indebtedness.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.469	Dividends. (if a participating contract) end of 3rd year.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.468	Misstatement of age or sex (the amount payable shall equal what the premium would have purchased using correct information.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.467	Entire Contract; policy and application.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.466	Incontestability (After 2 years from issue date)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.413(1)	Required policy contents, including form number.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.413(4)	Contractual provisions may not be signified as variable (i.e. may not be bracketed). Certain items that are variable by nature (i.e. current interest rates, officer's signature) may be indicated as variable.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.803	Contract must contain, on the first page in contrasting color or bold face type, a clear statement that benefits are on a variable or indeterminate basis, may increase or decrease, and are not guaranteed as to fixed dollar amount.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
627.465	Grace Period (30 days; optional 6% maximum interest charge for late payments.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
626.99(4)(a)	10 day free look. Unconditional refund. (Not applicable to variable life policies.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Back

Done

I-File gives you one final look at the checklist you have selected as well as your compliance with the standards.

Click “Back” to return to the Edit Form Checklist screen or “Done” to return to your Filing Component List.

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

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**iFILE**

**Filing Component List**

**Common Tasks**

- start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Work Unit Number: W05-192476  
Name: ANN-123 Filing  
Purpose: Forms & Rates  
Product: Individual Nonvariable Annuities Deferred Flexible Premium  
**mwnnt.IIFIA!MO**

Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
Company Data	11/3/2005 15:05	Complete
Actuarial Memorandum Life Actuarial Memorandum	11/4/2005 10:43	Complete
Cover Letter	11/4/2005 11:12	Complete
OIR-82-1507 L&H Universal Standardized Data Letter	11/7/2005 15:24	Complete
Forms Checklist	11/7/2005 16:15	Complete
Forms to be Reviewed	11/3/2005 11:08	Incomplete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/3/2005 11:08	-----
Rate Pages(Optional)	11/3/2005 11:08	-----
Supplementary Information(Optional) Supplementary Documentation	11/3/2005 11:08	-----

Review this Filing Return to Workbench

The Forms Checklist component now reads "Complete".

Click the next component in the list to continue.



The image shows a screenshot of the Florida Office of Insurance Regulation's iFILE web application. At the top, there is a header with the word "FLORIDA" in large letters, the "OFFICE OF INSURANCE REGULATION" text, and the state seal. Below the header is a navigation menu with links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled "Forms to be Reviewed" and displays information for a specific filing: "Filing: W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)". A message asks the user to provide information for the form(s) submitted. Below this is a table with three columns: "Form Title", "Form Number", and "Original Filing Number". The table is currently empty, with the text "There are no forms currently associated with this filing." displayed below it. To the right of the table are two buttons: "Add New Form" and "Save". On the left side of the page, there is a sidebar with a navigation menu under "Common Tasks" (Start a new filing, Submit a filing, Review submitted filings, Add to a submitted filing) and "Other Places" (Filing workbench).

Here is where you will add any forms that you are submitting for approval. Click “Add New Form” to continue or “Save” to return to your Filing Component List.

Provide the requested information, and note that a “Form Title” is required.

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**L&H Universal Data Letter**

**Filing:** W05-192476 (Forms & Rates - Individual Nonvariable Annuities Deferred Flexible Premium)

**Section XI Continued: Add New Form**

Please provide the following information for the form submitted with this filing.

**Files must be less than ten Megabytes ( 10,000 Kilobytes ) and 1000 pages in size.**

Form Title\*

Form Number

Original Filing Number

Original Form Number

Product Individual Nonvariable Annuities Deferred Flexible Premium

Form (choose from your computer)

**,A};FILE\_**

**L&H**

**Common Tasks**

- start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Filing: WOS-192476 (Forms & Rates- Individual Premium)

**Section XI Continued: Add New**

Please provide the following information for the filing.

Files must be less than ten Megabytes (10,000 KB).

Form Title\*

Form Number

Original Filing Number

Original Form Number

Product

Form (choose from your computer)

Look in: Demo Material

- 04-03653 - Annuity Investors- ACK.doc
- 04-03655 - Annuity Investors - APPROVAL.doc
- 04-03655 - Annuity Investors - CLAR.doc
- Act Memo.doc
- annuityinvestors annuity contract (stamped).pdf
- annuity investors cover letter (stamped).pdf
- Back Office Data to Front Office Reporting.pps
- Cover letter.doc
- EDMS Workflow User Guide2 v5.doc
- EDMS Workflow User Guide2 v5.ap
- Forms-FLA 04-03655-1.doc
- !@! -File & Workflow Links.doc
- File Emails.doc
- WFS UR s.doc
- life Insurance Policy.doc
- @ MAPP endorsement.doc
- nonforfeiture standards .doc
- @ valuation standards.doc

Filename:

Files of type:

Click Browse to locate the document you wish to upload, and then click “Open”.

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**FILE** \_\_\_\_\_ **L&H Universal Data Letter**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

Filing: W05-192476 (Forms & Rates- Individual Nonvariable Annuities Deferred Flexible Premium)

**Section XI Continued: Add New Form**

Please provide the following information for the form submitted with this filing.

Files must be less than ten Megabytes ( 10,000 Kilobytes) and 1000 pages in size.

Form Title \*

Form Number

Original Filing Number

Original Form Number

Product Individual Nonvariable Annuities Deferred Flexible Premium

Form (choose from your computer)  [Browse...](#)

Verify that you've uploaded the correct form, and then click "Upload New Form".

Upload Progress - Microsoft Internet Explorer

Transferred Bytes	TotalBytes	Transferred Percentage
64512	115676	55.7%



Microsoft Internet Explorer

Help

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Links FBPS CORE Dictionary.com DOI EDMS - Prod EDMS - Test (78) EDMS - Dev (81) I-File - Production I-File

# FLORIDA

## OFFICE OF INSURANCE REGULATION

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### FILI!

### Forms to be Reviewed

Filing: W05-192476 (Forms & Rates -Individual Nonvariable Annuities Deferred Flexible Premium)

Please provide the following information for the form(s) submitted with this filing.

Form Title	Form Number	Original Filing Number
Annuity Contract		

[Add New Form](#)

[Save](#)

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

As your document uploads, a progress window will appear.

After the upload is complete, the page above will display. Click “Add New Form” to add another form, or click “Save” to return to your Filing Component List.

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**iFILE**

**Filing Component List**

Work Unit Number: W05-192476  
 Name: ANN-123 Filing  
 Purpose: Forms & Rates  
 Product: Individual Nonvariable Annuities Deferred Flexible Premium  
[edit filing details](#)

Component	Last Updated	Status
Company Data	11/3/2005 15:05	Complete
Actuarial Memorandum Life Actuarial Memorandum	11/4/2005 10:43	Complete
Cover Letter	11/4/2005 11:12	Complete
DIR-B2-1507 L&H Universal Standardized Data Letter	11/7/2005 15:24	Complete
Forms Checklist	11/7/2005 16:15	Complete
Forms to be Reviewed	11/8/2005 08:43	Complete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/3/2005 11:08	-----
Rate Pages (Optional)	11/3/2005 11:08	-----
Supplementary Information (Optional) Supplementary Documentation	11/3/2005 11:08	-----

Review this Filing Return to Workbench **Submit Filing**

The Forms to be Reviewed component now reads “Complete”.

Now that you have satisfied all of the required components, the “Submit Filing” button displays.

At this point you may either submit your filing or continue adding information.

From: iportal@fldfs.com Sent: Wed 10/5/2005 10:05 AM  
To: PatrickLynch  
Cc:  
Subject: FL OR Industry Portal: Document compatibility!-File test

*J; FILE-* **Multi State Review**

Thank you for posting your documents. Your documents will now be verified as being compatible with the !-File system and virus free. You will be notified of the verification results shortly. If there are any technical problems with your uploaded documents, your submission will not be accepted and will be returned to your workbench for correction. If your uploaded documents are verified, you will be notified that your submission has been assigned an OIR file log tracking number and forwarded for formal review.

If you have any questions please *utilize the* I-Portal Issue Tracking System at <https://iportal.fldfs.com/iframe/its/default.asp>

**Filing Details:**

**Work Unit Number:** W05-175346  
**Submission ID:** 000158784  
**Date Submitted:** 10/5/2005 10:05:03 AM  
**Filing Purpose:** Multi-State  
**Product:** Individual Nonvariable Annuities Deferred Fixed Premium  
**Component List:** ANNUITIES MULTI-STATE FILINGS  
**Company Name:** PRUCO LIFE INSURANCE COMPANY  
**NAIC Company Code:** 79227  
**Company Filing #:**

Your account information is listed below for future reference:

Your user name is: Patrick.Lynch@fldfs.com  
You selected your password at registration.

If you did not authorize this registration, someone has mistakenly registered using your e-mail address. We regret the inconvenience. Please forward this e-mail to [iportal@fldfs.com](mailto:iportal@fldfs.com) and write "cancel" in the subject line.

<http://dfsaspsintt02/iframe/>

Once you've submitted your filing, it then runs through a series of checks. This includes checking document size (less than 999 pages), a virus check, and a check to ensure that the submitted documents can be converted to a format used in the electronic stamping process. If any documents fail.....

... you will receive an email similar to this one.

The email will include the document(s) which had problems.

For help, please submit an issue through Contact Us, and provide the Office with the Work Unit Number for the filing in question.

**From:** iportal@fldfs.com [mailto:iportal@fldfs.com]  
**Sent:** Wednesday, December 14, 2005 14:42  
**To:**  
**Subject:** FL OIR Industry Portal: Filing Failed at Document TIF Converting



Florida Office of Insurance Regulation

This e-mail message is to inform you that your filing did not submit successfully to Office of Insurance Regulation because one or more of the documents in the filing did not pass a test for compatibility with the I-File system. Examples of non-compatible documents include documents with embedded macros, word documents with embedded formulas or multi page .tif documents (only use single page .tif documents). Please correct the document and re-upload in the Filing Workbench and submit the filing.

The **failed documents** are listed as:

**Countrywide Pages (final version).tif** with document id of 454464  
**Countrywide Pages (annotated version).tif** with document id of 454466

If this failed posting is in response to a request for clarification from the Office, please note the date requirement for your response. Though your filing is being held in suspense pending your response, your response must reach the Office by this required date to allow the Office sufficient time to analyze your response. The failure of your response reaching the Office by this date requirement may result in the filing's **DISAPPROVAL** pursuant to applicable provisions of Florida Statute.

If you have any concerns of the timeliness of your posting, please do not hesitate to contact the reviewer assigned to this filing.

If you have any technical questions please utilize the I-Portal Issue Tracking System at <https://iportal.fldfs.com/ifs/default.asp>

Filing Details:

**Work Unit Number:** W05-201062  
**Submission ID:** 000184170  
**Date Submitted:** 12/14/2005 02:33:44 PM  
**Filing Purpose:** Rules Only  
**Product:** Commercial Auto / Other Commercial Auto  
**Component List:** COMMERCIAL RULE FILING  
**Company Name:** DISCOVER PROPERTY & CASUALTY INSURANCE COMPANY  
**NAIC Company Code:** 36463  
**Company Filing #:** FL-DPC-Auto-Revision 05R

From: [iportal@fldfs.com](mailto:iportal@fldfs.com) Sent: Wed 10/5/2005 10:11 AM

To: Patrick Lynch;Michael Kipp

Cc:

Subject:  OIR Industry Portal: Filing Receipt

---

 **Multi State Review**

Hello Patrick! This e-mail message is to inform you that your filing has been received.

Your filing has been assigned the following File Log Number. Please use this number for all communication regarding this filing.

**Original File Log Numbe- : MSLH 05-08667**

**Filing Details:**

- Filing Name:
- Work Unit Number: W05-175346
- Submission ID: 000158784
- Date Submitted: 10/5/2005 10:05:03 AM
- Filing Purpose: Multi-State
- Product: Individual Nonvariable Annuities Deferred Fixed Premium
- Component List: ANNUITIES MULTI-STATE FILINGS

Your account information is listed below for future reference:

Your user name is: Patrick.Lynch@fldfs.com  
You selected your password at registration.

If you did not authorize this registration, someone has mistakenly registered using your e-mail address. We regret the inconvenience. Please forward this e-mail to [iportal@dfs.state.fl.us](mailto:iportal@dfs.state.fl.us) and write "cancel" in the subject line.

<https://iportal.fldfs.com/ifile>

If your filing successfully passed the compatibility check, you will receive an email with the Florida file log number that has been assigned to it. Refer to this number when corresponding with the Office.

# Review This Filing

At any point in the process, you have the option to review your filing. Click “Review this Filing” to view and/or print the information you’ve provided for your filing.

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Filing Component List**

Work Unit Number: W05-192476  
Name: ANN-123 Filing  
Purpose: Forms & Rates  
Product: Individual Nonvariable Annuities Deferred Flexible Premium  
[edit filing details](#)

Component	Last Updated	Status
Company Data	11/3/2005 15:05	Complete
Actuarial Memorandum Life Actuarial Memorandum	11/4/2005 10:43	Complete
Cover Letter	11/4/2005 11:12	Complete
OIR-B2-1507 L&H Universal Standardized Data Letter	11/7/2005 15:24	Complete
Forms Checklist	11/7/2005 16:15	Complete
Forms to be Reviewed	11/8/2005 08:43	Complete
Certification Statement: Valuation Standards (Optional)	11/3/2005 11:08	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/3/2005 11:08	-----
Rate Pages (Optional)	11/3/2005 11:08	-----
Supplementary Information (Optional) Supplementary Documentation	11/3/2005 11:08	-----

[Review this Filing](#) [Return to Workbench](#) [Submit Filing](#)

# Review Filing

## Filing Details

**Work Unit Number:** W05-192476  
**Filing Purpose:** F-...  
**Product:** I  
**Date Created:** 1  
**Filing Name:** A

## Company Details

**Company Name:**  
 PRUCO LIFE INSURANCE C

## Filing Originator Info

**Company E-Mail:**  
**Contact Name:**  
**Contact Title:**  
**Professional Designation:**  
**Contact E-mail:**

## Professional Designation:

**Phone Number:**  
**Fax Number:**  
**Toll Free Number:**  
**Non US Phone Number:**

## Street Address:

**Suite/Room #:**  
**P.O. Box Mailing Address:**  
**Department:**  
**City:**  
**State:**  
**Zip Code:**  
**Country:**  
**Non US Postal Code:**

## Department:

**City:**  
**State:**  
**Zip Code:**  
**Country:**  
**Non US Postal Code:**

## Zip Code:

**Country:**  
**Non US Postal Code:**

## Phone Number:

**Fax Number:**  
**Toll Free Number:**  
**Non US Phone Number:**

## D. Individual Policy tha

1. Optional Renewable
2. Conditionally Renewa
3. Guaranteed Renewab

## Company Contact Information

**Contact Name:** Mr. Patrick Lynch  
**Contact Title:**  
**Professional Designation:**  
**Contact E-mail:**

## Uploaded Documents

Document Type	Filenet Number	Form Number	Title
Actuarial Memorandum	0		Actuarial Memorandum
Cover Letter	0		Cover Letter
Forms	0		Annuity Contract

## Forms to Be Reviewed

Form Number	Form Title	New Form Effective Date	Original Form Number	Original Form Effective Date
	Annuity Contract			

## Review Standards Checklist 1

### Checklist Description:

Statute/Rule	Description
627.4145	Readability
627.482(1)	Statutory Required
95.11(2)(b)	Legal actions limita
627.4131	Telephone number
627.462	If the policy provid installment table sl description of the a
627.416	Form must contain
4-223.023(2) (b)	Bank Disclosure lar
627.474	Entire contract.
627.472	Incontestability aft
627.470	Reinstatement. On payments and inde
627.469	Dividends. (if a par
627.468	Misstatement of ag what the premium i information.)
627.467	Entire Contract; pol
627.466	Incontestability (Aft
627.413(1)	Required policy con
627.413(4)	Contractual provisio not be bracketed), current interest rate

## Rate Filing Certification

**YES**, I certify that I and am authorized to make this Rate Filing on behalf of the company, further that the information contained in related transmittals and the filing is true, complete, correct, and in compliance with all applicable state laws. I certify that the proposed premiums are reasonable in relationship to the benefits provided.(Bold One)

I am an actuary  
**I am not an actuary**

**Name:**  
**Title:**

## Readability Certification

**YES**, I certify that the filing of this policy meets the requirements of Section 627.4145 (1), Florida Statutes, in the following manner (Bold One)

**the policy meets the minimum reading ease test score on the test used or;**

the score is lower than the minimum required but should be approved in accordance with Subsection 627.4145 (2), Florida Statutes.

I acknowledge that the office may require the submission of further information to verify this certification.

**Name:**  
**Title:**

## Checklist Certification

**YES**, I have reviewed or supervised the review of the policy form(s) that this filing describes. I hereby certify that the statements made in this filing are in compliance with applicable Florida Statutes and Rules. I further certify it will be revised and/or discontinued if the Office determines that the form(s) does not comply with Florida law.

**Name:**  
**Title:**

[Printable Version](#)    [Return to Component List](#)

At the bottom of the page, you can click “Printable Version” to print a copy of your filing information or “Return to Component List”.

# Response Filing



## Filing Assembly and Submission

To add to a filing that you've already submitted, click the "Filing Assembly and Submission" option on the main I-Portal screen.

On the next screen, under Common Tasks, select "Add to a submitted filing".

The screenshot shows the Florida Office of Insurance Regulation website. The header includes the state name "FLORIDA" and the "OFFICE OF INSURANCE REGULATION" logo. A navigation bar contains links for Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled "Filing Assembly Submission System" and includes a welcome message: "Welcome to the Filing Assembly Submission System (FASS). Here, you can build and maintain filings required by the Office. To start a new filing, click **Start a new filing**. To work on an existing filing, click **Work on an in-progress filing**. To review a filing already submitted to the Office, click **Review submitted filings**." Below this is a "Choose a Task" section with three image-based buttons: "Start a new filing", "Work on an in-progress filing", and "Review submitted filings". A left sidebar contains "Common Tasks" with a list including "Add to a submitted filing" (highlighted in red), and "Other Places" with "Filing workbench".

By file log number, select the filing to which you wish to add information.

When you do, you'll receive the message below. Click "OK" to proceed or "Cancel" to select a different filing.



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**iFILE**

**Common Tasks**

- Start a new filing
- Start Data Reporting
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Add to a Submitted Filing**

This is a list of all filings that you have submitted that can be amended. To add to a filing, click on its File Log Number.

**NOTE:** Filings are only available to amend once the Office has assigned a File Log Number. You will receive an email message when the File Log Number is assigned.

**Choose a filing to amend**

File Log Number	Date Submitted	Submission ID	Work Unit Number
04-03664	5/17/2004 10:30:02 AM	85903	W04-100602
04-05050	6/18/2004 09:59:27 AM	86243	W04-101002
04-03719	6/25/2004 08:28:12 AM	86403	W04-101162
<b>04-03720</b>	6/25/2004 08:30:50 AM	86404	W04-101163
05-00102	6/7/2005 04:45:23 PM	88388	W04-101482
04-03756	9/14/2004 03:11:10 PM	86687	W04-101507
04-03765	9/23/2004 04:09:37 PM	86783	W04-101622
04-03779	10/5/2004 04:14:23 PM	86903	W04-101783
04-03780	10/5/2004 04:22:26 PM	86904	W04-101784



**FLORIDA**  
OFFICE OF INSURANCE REGULATION



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## Add to a Submitted Filings

This filing has been opened. You can now add new files and update components.

Work Unit Number	Date Created	Purpose	File Log Number
W05-180766	11/8/2005 10:22:21 AM	Forms Only	04-03720

**Common Tasks**

- Start a new filing
- Start Data Reporting
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

I-File will create a new Work Unit Number for your response. This number, separate from the file log number, identifies each filing submission. Click the work unit number to continue.



**Common Tasks**

- Start a new filing
- Start Data Reporting
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

## Filing Component List

**Work Unit Number:** W05-180766  
**Name:** Variable-Flex  
**Purpose:** Forms Only  
**Product:** Variable Individual Annuities Deferred Flexible Premium  
[edit filing details](#)

Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
Company Data (Optional)	11/8/2005 10:22	-----
Cover Letter (Optional)	11/8/2005 10:22	-----
DIR-1507 (Optional) L&H Universal Standardized Data Letter	11/8/2005 10:22	-----
Forms Checklist	11/8/2005 10:22	-----
Forms to be Reviewed (Optional)	11/8/2005 10:22	-----
Certification Statement: Valuation Standards (Optional)	11/8/2005 10:22	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/8/2005 10:22	-----
Supplementary Information (Optional) Supplementary Documentation	11/8/2005 10:22	-----

[Review this Filing](#)    [Return to Workbench](#)

Since this is a response filing, there are no required components. Everything is optional.

Select the component on which you wish to work, and follow the same steps as you did for your initial submission.

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**iFILE**

**Common Tasks**

- Start a new filing
- Start Data Reporting
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Filing Component List**

Work Unit Number: W05-180766  
 Name: Variable-Flex  
 Purpose: Forms Only  
 Product: Variable Individual Annuities Deferred Flexible Premium  
[edit filing details](#)

Component	Last Updated	Status
Company Data (Optional)	11/8/2005 10:22	-----
Cover Letter (Optional)	11/8/2005 10:22	-----
DIR-1507 (Optional) L&H Universal Standardized Data Letter	11/8/2005 10:22	-----
Forms Checklist	11/8/2005 10:22	-----
Forms to be Reviewed (Optional)	11/8/2005 10:45	Included
Certification Statement: Valuation Standards (Optional)	11/8/2005 10:22	-----
Certification Statement: Nonforfeiture Standards (Optional)	11/8/2005 10:22	-----
Supplementary Information (Optional) Supplementary Documentation	11/8/2005 10:22	-----

Review this Filing Return to Workbench Submit Filing

Once you have completed a component, the status changes to “Included”.

Also, when at least one component is complete, you will again have the “Submit Filing” button. Click the button to submit your response.

**FLORIDA**  
OFFICE OF INSURANCE REGULATION

Home Help Contact Us Account Filing Search Logout

**iFILE**

**Common Tasks**

- Start a new filing
- Start Data Reporting
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Submit Filing**

Thank you for posting your documents. Your documents will now be being compatible with the I-File system and virus free. You will be notified of the verification results shortly. If there are any technical problems with your documents, your submission will not be accepted and will be returned to your workbench for correction. If your uploaded documents are verified, you will be notified that your submission has been assigned an OIR file log tracking number and forwarded for formal review.

**Filing Details**

**Work Unit Number:** W05-180766  
**Submission ID:** 000164064  
**Date Submitted:** 11/8/2005 10:49:56 AM  
**Filing Purpose:** Forms Only  
**Product:** Variable Individual Annuities Deferred Flexible Premium  
**Component List:** LIFE & ANNUITIES FORM FILINGS  
**Company Name:** ANNUITY INVESTORS LIFE INSURANCE COMPANY  
**NAIC Company Code:** 93661  
**Company Filing #:**

[Return to Workbench](#)

FL OIR Industry Portal: Document compatibility I-File test - Message (HTML)

From: iportal@fdfs.com  
 To: Patrick Lynch  
 Cc:  
 Subject: FL OIR Industry Portal: Document compatibility I-File test

Sent: Tue 11/8/2005 10:50 AM

**iFILE** The Office of Insurance Regulation

Thank you for posting your documents. Your documents will now be verified as being compatible with the I-File system and virus free. You will be notified of the verification results shortly. If there are any technical problems with your uploaded documents, your submission will not be accepted and will be returned to your workbench for correction. If your uploaded documents are verified, you will be notified that your submission has been assigned an OIR file log tracking number and forwarded for formal review.

If this posting is in response to a request for clarification from the Office, please note the date requirement for your response. In this case, your filing is being held in suspense pending your response. Yet, in order to allow the Office sufficient time to analyze your response, please respond by the date indicated in the clarification letter you received. The failure of your response reaching the Office by this date requirement may result in the filing's **DISAPPROVAL** pursuant to applicable provisions of Florida Statute.

**This submission is for the additional information for filing with File Log Number 04-03720.**

If you have any concerns of the timeliness of your posting, please do not hesitate to contact the reviewer assigned to this filing.

If you have any technical questions please utilize the I-Portal Issue Tracking System at <https://iportal.fdfs.com/file/its/default.asp>

**Filing Details:**

**Work Unit Number:** W05-180766  
**Submission ID:** 000164064  
**Date Submitted:** 11/8/2005 10:49:56 AM  
**Filing Purpose:** Forms Only  
**Product:** Variable Individual Annuities Deferred Flexible Premium  
**Component List:** LIFE & ANNUITIES FORM FILINGS  
**Company Name:** ANNUITY INVESTORS LIFE INSURANCE COMPANY  
**NAIC Company Code:** 93661  
**Company Filing #:**

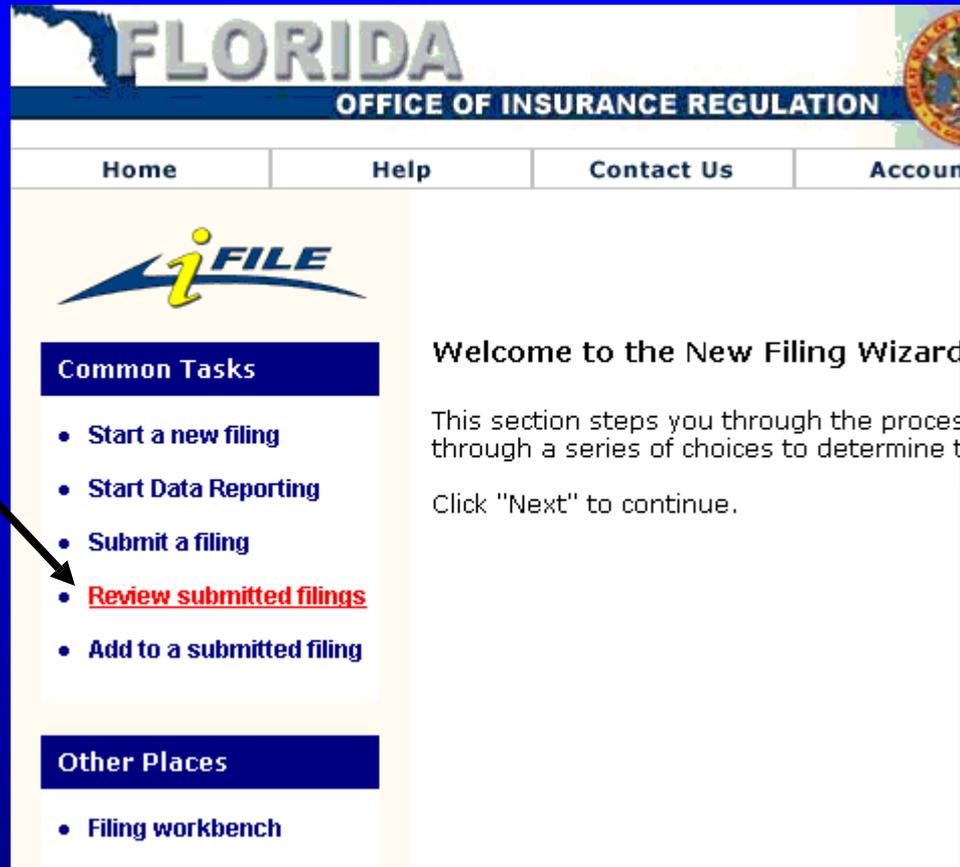
Your account information is listed below for future reference:  
 Your user name is: Patrick.Lynch@fdfs.com  
 You selected your password at registration.

If you did not authorize this registration, someone has mistakenly registered using your e-mail address. We regret the inconvenience. Please forward this e-mail to [iportal@fdfs.com](mailto:iportal@fdfs.com) and write "cancel" in the subject line.

After submitting your response, you will see the screen above, notifying you that your documents are being checked for compatibility. You will also receive an email with this information. Click "Return to Workbench" to work on another filing or "Logout" to exit.

# Review Submitted Filings

You have the ability to review filings that you have previously submitted. To do so, click the “Review submitted filings” option under Common Tasks.



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**iFILE**

**Common Tasks**

- Start a new filing
- Start Data Reporting
- Submit a filing
- **Review submitted filings**
- Add to a submitted filing

**Other Places**

- Filing workbench

**Welcome to the New Filing Wizard**

This section steps you through the process through a series of choices to determine the type of filing you want to submit.

Click "Next" to continue.

This screen will list each submission (both original and response) by Work Unit Number. This screen will also display the time and date of submission, a submission ID, and the corresponding Florida File Log Number.

To access a filing, click on the appropriate Work Unit Number.

## Review Submitted Filings

This is a list of all filings that you have submitted in the past. To review the contents of a filing, click on its Work Unit Number.

### Choose a filing to review

Work Unit Number	Date Submitted	Submission ID	File Log Number
WD4-100802	5/12/2004 10:30:02 AM	000085903	04-03664
WD4-100826	5/13/2004 01:19:12 PM	000085923	04-03665
WD4-100830	5/13/2004 02:01:22 PM	000085924	04-03665
WD4-100862	6/9/2004 09:58:37 AM	000086143	04-03689
WD4-100863	6/9/2004 10:06:16 AM	000086144	04-03690
WD4-100864	6/9/2004 10:26:18 AM	000086145	04-03691
WD4-100865	6/9/2004 10:36:11 AM	000086146	04-03691
WD4-101002	6/18/2004 09:59:27 AM	000086243	04-05050
WD4-101162	6/25/2004 08:28:12 AM	000086403	04-03719
WD4-101163	6/25/2004 08:30:50 AM	000086404	04-03720

You will then be taken to the Filing Component List for this submission. Here you can view the components that were completed as part of this filing.

*(You cannot add information to a filing under this option.)*

As with active filings, you can click “Review this Filing” to view a page containing detailed filing information.

You will need to use the “Filing Search” option to view and/or retrieve any documents contained in your filings.

## Filing Component List

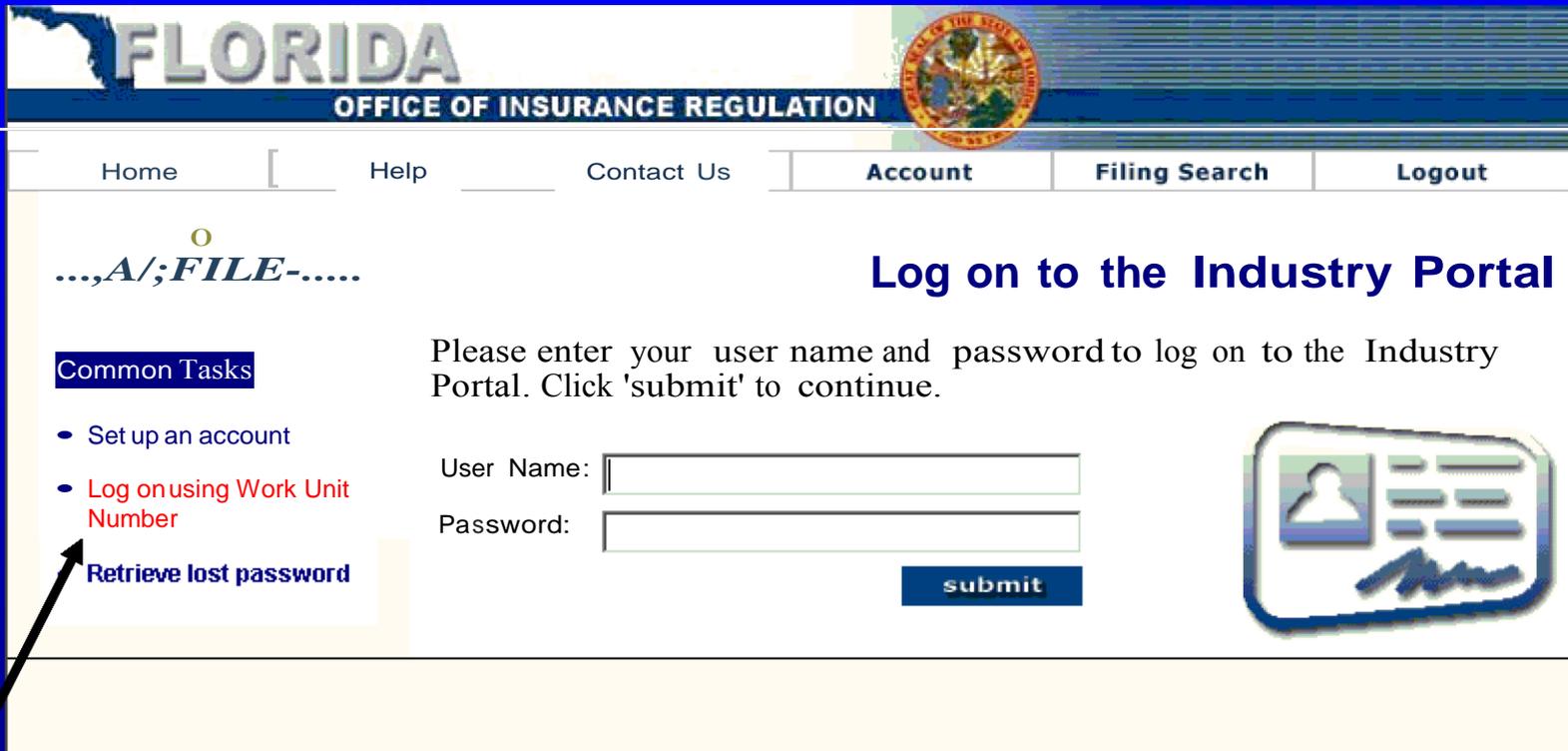
**Work Unit Number:** W04-101163  
**Name:** Variable-Flex  
**Purpose:** Forms Only  
**Product:** Variable Individual Annuities Deferred Flexible Premium

To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
Company Data	6/25/2004 08:29	Complete
Cover Letter	6/25/2004 08:29	Complete
OIR-1507 L&H Universal Standardized Data Letter	6/25/2004 08:30	Complete
Forms Checklist	6/25/2004 08:30	Complete
Forms to be Reviewed	6/25/2004 08:30	Complete
Certification Statement: Valuation Standards	6/25/2004 08:28	-----
Certification Statement: Nonforfeiture Standards	6/25/2004 08:28	-----
Supplementary Information Supplementary Documentation	6/25/2004 08:28	-----

[Review this Filing](#)   [Return to Workbench](#)

# Logging in with a Work Unit Number



The screenshot shows the Florida Office of Insurance Regulation website. At the top, there is a navigation bar with links for Home, Help, Contact Us, Account, Filing Search, and Logout. Below the navigation bar, there is a section titled "Log on to the Industry Portal". To the left of this section, there is a "Common Tasks" list with three items: "Set up an account", "Log on using Work Unit Number" (highlighted in red), and "Retrieve lost password". An arrow points from the text below to the "Log on using Work Unit Number" option. The main content area contains a login form with fields for "User Name:" and "Password:", and a "submit" button. To the right of the form is a graphic of a person's profile with a signature.

FLORIDA  
OFFICE OF INSURANCE REGULATION

Home Help Contact Us Account Filing Search Logout

...,A/;FILE-.....

## Log on to the Industry Portal

Please enter your user name and password to log on to the Industry Portal. Click 'submit' to continue.

**Common Tasks**

- Set up an account
- **Log on using Work Unit Number**
- Retrieve lost password

User Name:

Password:

**submit**

You need someone else's assistance in completing your filing, but you don't want to give them access to your entire account. No problem. That's when you can utilize the "Log on using Work Unit Number" option.

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**iFILE**

**Common Tasks**

- Set up an account
- Login with Username

**Log onto the Industry Portal**

Please enter the Work Unit Number and password to access the filing you wish to work on. Click 'submit' to continue.

Work Unit Number:

Password:

**submit**



Once you've selected that option, enter the Work Unit Number and the individual filing's password (if you provided one when naming your filing). Then click Submit.

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OFFICE OF INSURANCE REGULATION

Home Help Contact Us Account Filing Search Logout

**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

**Filing Component List**

**Work Unit Number:** W05-199510  
**Name:** demo  
**Purpose:** Forms Only  
**Product:** Individual Nonvariable Annuities Deferred Flexible Premium

Listed below are all the components required to submit this filing. To view a component, click on its name. Your changes are automatically saved. To review the current details of your filing, click "Review this Filing".

Component	Last Updated	Status
Company Data	12/7/2005 14:00	Complete
Cover Letter	12/7/2005 14:01	Complete
OIR-B2-1507 L&H Universal Standardized Data Letter	12/7/2005 13:58	Incomplete
Forms Checklist	12/7/2005 14:05	Complete
Forms to be Reviewed	12/7/2005 13:58	Incomplete
Certification Statement: Valuation Standards (Optional)	12/7/2005 13:58	-----
Certification Statement: Nonforfeiture Standards (Optional)	12/7/2005 13:58	-----
Supplementary Information (Optional) Supplementary Documentation	12/7/2005 13:58	-----

Review this Filing Return to Workbench

Notice that many of the options on the Filing Component List page are grayed out.

Under the work unit number option, you may add information to the filing just as you would normally, but you will not be able to submit it. That can only be done when logged in as the user who originally created the filing.

# Multi-State (Fast Track) Filings

The screenshot shows the Florida Office of Insurance Regulation's iFILE portal. The header includes the state seal and navigation links: Home, Help, Contact Us, Account, Filing Search, and Logout. The main content area is titled "Select Submission Option" and contains the following text:

Please select a submission option for this filing.  
Click "Next" to continue.

**Select Submission Option**

**Florida Only Filing**  
Selecting "Florida Only Filing" indicates that you wish to have your product submission reviewed for use in the State of Florida only.

**Multi-State Filing**  
Selecting this option indicates that you wish to use "Multi-State Filing" for product submissions to obtain cooperative review by the states listed. This is a voluntary program initiated by the states and is provided for your convenience.

Please note that to submit a "Multi-State Filing", the carrier(s) you represent must have a valid, active Certificate of Authority in the states of **California, Florida, and Texas**. Additionally, any action by this program does not constitute, imply, or convey any additional authorities to the submitting carrier(s) other than those previously granted by the associated states.

Note that if you are licensed in any of the other states participating in this program, acceptance of your filing will result in an approval from those states.

Before submitting your filing for Multi-State Review, you must read and agree to the [Terms of Use and Agreement](#).

If you have any questions concerning which of these selection options is appropriate for your filing, please contact your IFile host, the Florida Area of Life and Health Forms and Rates via email at [lhfrbureau@fdfs.com](mailto:lhfrbureau@fdfs.com) or call 1-850-413-3152 (Forms Section) or 1-850-413-3151 (Rates Section).

At the bottom of the page are three buttons: Cancel, Back, and Next.

When creating a Life & Health filing, one of your submission options is Multi-State.

By choosing this option, you can submit an annuity filing for simultaneous review and approval in multiple states.

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OFFICE OF INSURANCE REGULATION

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**iFILE**

**Common Tasks**

- Start a new filing
- Submit a filing
- Review submitted filings
- Add to a submitted filing

**Other Places**

- Filing workbench

### Select Submission Option

Please select a submission option for this filing.

Click "Next" to continue.

**Select Submission Option**

**Florida Only Filing**

Selecting "Florida Only Filing" indicates that you wish to have your product submission reviewed for use in the State of Florida only.

**Multi-State Filing**

Selecting this option indicates that you wish to use "Multi-State Filing" for product submissions to obtain cooperative review by the **states listed**. This is a voluntary program initiated by the states and is provided for your convenience.

Please note that to submit a "Multi-State Filing", the carrier(s) you represent must have a valid, active Certificate of Authority in the states of **California, Florida, and Texas**. Additionally, any action by this program does not constitute, imply, or convey any additional authorities to the submitting carrier(s) other than those previously granted by the associated states.

Note that if you are licensed in any of the other states participating in this program, acceptance of your filing will result in an approval from those states.

Before submitting your filing for Multi-State Review, you must read and agree to the [Terms of Use and Agreement](#).

If you have any questions concerning which of these selection options is appropriate for your filing, please contact your IFile host, the Florida Area of Life and Health Forms and Rates via email at [lhfrbureau@fldfs.com](mailto:lhfrbureau@fldfs.com) or call 1-850-413-3152 (Forms Section) or 1-850-413-3151 (Rates Section).

Cancel Back Next

The MSRP was started by Florida, California, and Texas and is continually adding additional states. To view the states currently involved, click the "states listed" link.

Multi-State - Microsoft Internet Explorer

**Multi-State Participating States**

California

Florida

Georgia

Louisiana

Nevada

Texas

Close

## TERMS OF USE AND AGREEMENT

Click "I Agree" to continue.

This is a legal agreement governing the use of the I-File System.

### **Please Read this Agreement Carefully.**

By using the I-File System, the user agrees to be bound by the terms of this agreement. By accessing, browsing and/or using this site ("Site"), you acknowledge that you have read, understood, and agree, to be bound by these terms and to comply with all applicable laws and regulations. You should review the **Standards and the Process for form review and approval** contained herein to determine if you meet the standards prior to making a filing. If you do not agree to these terms, do not use this site.

### **TERMS OF USE**

This is a voluntary program by the participating states, provided for your convenience. Use of this I-file system for the purpose of obtaining cooperative review by all participating states under the Memorandum of Understanding constitutes the agreement by the user to the following terms and conditions:

1. The user waives all state deemer provisions. Under no circumstances shall forms be approved for use in any participating state automatically due to the elapse of time from the date of initial submission of the form through this system.
2. The user acknowledges and agrees that if a Form is not approved through this process, the sole and exclusive remedy available to the user is to submit the Form to the individual states through their normal process, and seek approval in the individual states. The user waives all administrative rights for the purpose of cooperative review by all participating states. If that cooperative review results in a rejection of the Form, or in a determination that the form does not meet the Uniform Standards, the user may file the form in individual states, and if the form is disapproved in individual states, may avail itself of any administrative rights in those "individual" states. No Administrative review is available for a rejection of a Form based on the cooperative review by the participating states, nor for a determination by the participating states that a Form does not meet Uniform Standards.
3. The payment of filing fees may be required by participating states.
4. Materials submitted to this system may be subject to the public records laws of the participating states.

After reading the Terms of Use and Agreement, click "I Agree" to proceed, "Back" to return to the previous page, or "Cancel" to return to the Filing Assembly Submission System screen.

Cancel

Back

I Agree

## Select the Line of Business

Please select one line of business for this filing. You are currently authorized to submit a filing for all the lines of business that are **bold**. You may choose to create a filing for one of the unauthorized lines, but you will not be able to submit your filing until you have the Office's authorization.

Click "Next" to continue.

### Select Line of Business:

- Fraternal Life and
- Group Life and/or**
- Individual Life and**
- Individual and/or (

## Select the Type of Insurance

Please select one Type of Insurance for this filing. You are currently authorized to submit a filing for all the Type of Insurances that are **bold**. You may choose to create a filing for one of the unauthorized Types of Insurance, but you will not be able to submit your filing until you have the Office's authorization.

Click "Next" to continue.

### Select Type of Insurance

- Individual Annuities - Deferred**
- Individual Annuities - Immediate

Please select one Sub Type of Insurance for this filing. You are currently authorized to submit a filing for all the Sub Types of Insurance that are **bold**. You may choose to create a filing for one of the unauthorized Sub Types of Insurance, but you will not be able to submit your filing until you have the Office's authorization.

Click "Next" to continue.

### Select Sub Type of Insurance

- Fixed Premium (A02.11.001)
- Flexible Premium (A02.11.002)**
- Modified Single Premium (A02.11.004)
- Single Premium (A02.11.003)

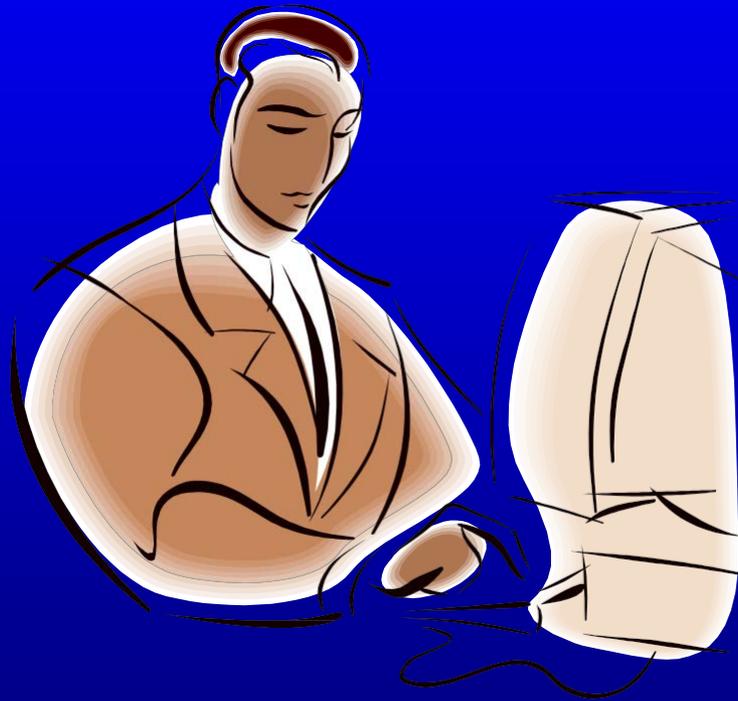
Cancel

Back

Next

After choosing your company, you'll select your product and continue creating your filing, just as you do for Florida-only submissions.

# Common I-File Questions

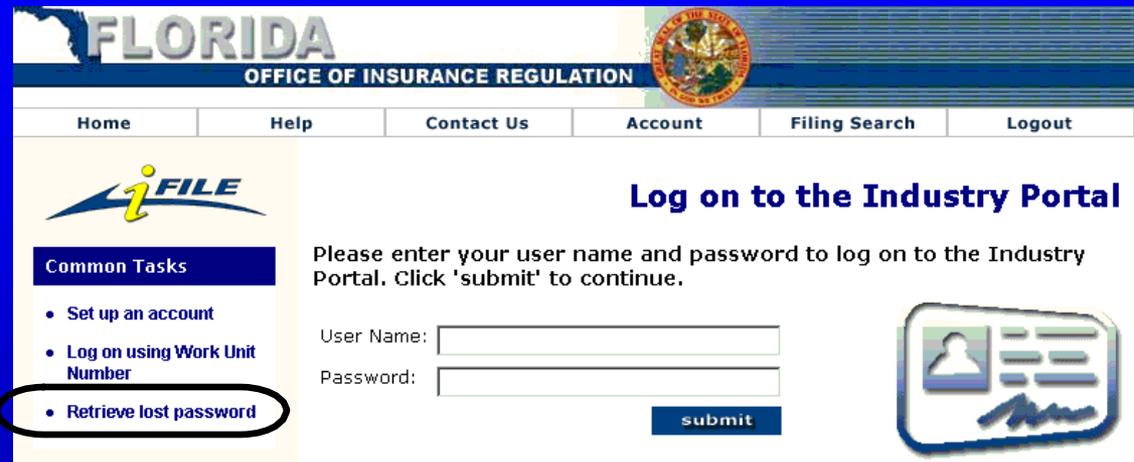


# Forgot Your Password?

*“I forgot my password, HELP!!!”*

No problem. If you ever forget your password, simply click the “Retrieve lost password” option on the Login screen.

Enter your email address, click “submit”, and the I-Portal will email your password to you.



**FLORIDA**  
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**iFILE**

**Common Tasks**

- Set up an account
- Log on using Work Unit Number
- **Retrieve lost password**

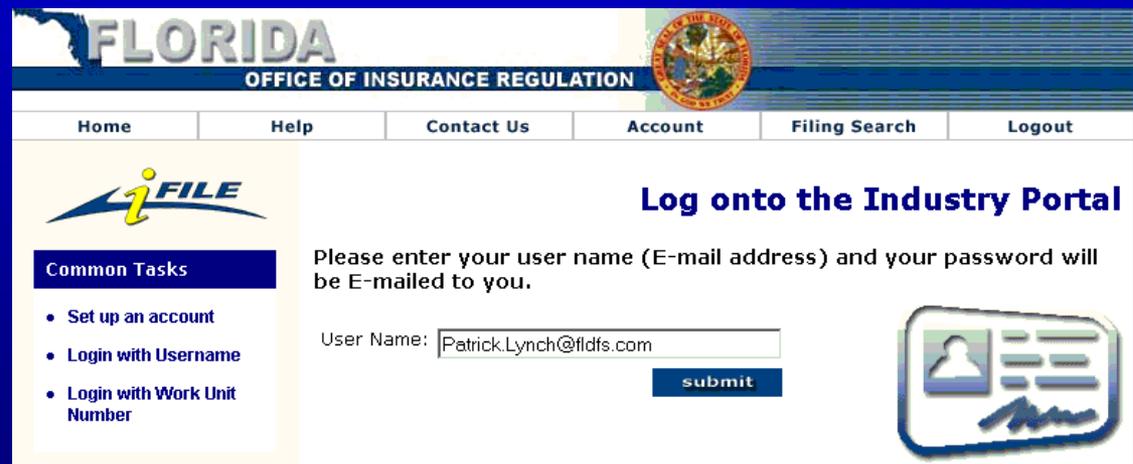
**Log on to the Industry Portal**

Please enter your user name and password to log on to the Industry Portal. Click 'submit' to continue.

User Name:

Password:

**submit**



**FLORIDA**  
OFFICE OF INSURANCE REGULATION

Home Help Contact Us Account Filing Search Logout

**iFILE**

**Common Tasks**

- Set up an account
- Login with Username
- Login with Work Unit Number

**Log onto the Industry Portal**

Please enter your user name (E-mail address) and your password will be E-mailed to you.

User Name:

**submit**

# Need An Account Change?

*“John Smith used to handle our filings, but he no longer works here. I now need to have access to that information.”*

No problem. Simply complete a Question under the Contact Us option providing OIR with the following:

- 1 – The name and email address of the user/person who has left the office
- 2 – The name and email address of the user/person who you want to now have access to the account

*(Please do not create a new account prior to submitting this request. If you already have an account of your own, we will not be able to merge the two accounts.)*

# Need Filing-Specific Assistance?

*“How long will my  
un-submitted filing  
remain on my  
workbench?”*

I-File will retain un-submitted/un-worked filings for 6 months (180 days). If you have not submitted a filing or at least completed/updated one of the filing's components, your submission will be deleted.

# Additional Questions?



If you have any additional questions that have not been covered in this material, please don't hesitate to contact us at the number below:

(850) 413-3152