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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 805087 (4)

1. Corporation Name
THE LINCOLN NATIONAL LIFE INSURANCE COMPANY

400001497944
-05/24/95--01038--008
*****8.75 *****8.75

DO NOT WRITE IN THIS SPACE

Principal Place of Business 1300 SOUTH CLINTON STREET FT. WAYNE IN. 46802-3506	Mailing Address 1300 SOUTH CLINTON STREET FT. WAYNE IN. 46802-3506
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3. Date Incorporated or Qualified 08/04/1939	3a. Date of Last Report 05/01/1994
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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4. FEI Number 35-0472300	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER
CAPITOL BLDG.
TALLAHASSEE FL. FL 32399

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature (hand or printed name of registered agent) and FEI Number NOTE: Registered Agent signature required when registering

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CCE ROLLAND, IAN M 1300 SO CLINTON ST FORT WAYNE IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCO ANKER, ROBERT A. 1300 SO CLINTON ST FORT WAYNE IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVD DUNSIRE, P KENNETH 1300 SO CLINTON ST FORT WAYNE IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVD WEST, THOMAS M 1300 SO CLINTON ST FORT WAYNE IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EV BOSCIA, JON A 1300 SO CLINTON ST FORT WAYNE IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S WOMACK, SUZANNE C. 1300 SO CLINTON ST FORT WAYNE IN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	D 200 East Berry Street Fort Wayne, Indiana 46802	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP	C/CE/D 200 East Berry Street Fort Wayne, In 46802	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	Resigned	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	Resigned	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	P/CO/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made or orally, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, upon an attachment with an address.

SIGNATURE *Lawrence J. Plano* Lawrence J. Plano, Second Vice President, 5/17/95 (219)455-2501
SIGNATURE (PRINTED OR TYPED) NAME OF SIGNING OFFICER OR DIRECTOR

THE LINCOLN NATIONAL LIFE INSURANCE COMPANY
 Supplement to Annual Registration Report for 1995
 State of Florida

NAMES OF OFFICERS AND DIRECTORS	TITLE	* ADDRESS
Anker, Robert A.	CH/CEO/D	200 East Berry St., Ft Wayne, In 46802
Boscia, Jon A.	P/COO/D	
Hunter, Jack D.	EVP/D	
McPhail, Gary R.	EVP	
Shaheen, Gabriel L.	EVP/D	1700 Magnavox Way, Ft Wayne, In 46804
Horein, James R.	SVP	1700 Magnavox Way, Ft Wayne, In 46804
Lewis, Stephen H.	SVP	1801 S. Meyers Rd, Oak Brook Ter, Il
Nightingale, Carolyn M.	SVP	
Tyler, William K.	SVP	1700 Magnavox Way, Ft Wayne, In 46804
Wright, Michael L.	SVP	
Alford, Timothy J.	VP	1700 Magnavox Way, Ft Wayne, In 46804
Baker, Carl L.	VP	
Baker, Roland C.	VP	
Becker, David N.	VP	
Becker, JoAnn E.	VP	200 East Berry St., Ft Wayne, In 46802
Behrendt, John M.	VP	
Brodrick, R. Michael	VP	1700 Magnavox Way, Ft Wayne, In 46804
Brody, Steven R.	VP	200 East Berry St., Ft Wayne, In 46802
Carstensen, Harold B., Jr.	VP	
Chambers, Donald C., M.D.	VP	
Clagg, Thomas L.	VP	1700 Magnavox Way, Ft Wayne, In 46804
Clark, Kenneth J.	VP	1700 Magnavox Way, Ft Wayne, In 46804
Clevenger, Kelly D.	VP	
DuMond, Marcia L.	VP	200 East Berry St., Ft Wayne, In 46802
Edris, C. Lawrence	VP	
Elliott, Jay A.	VP	
Fitch, Thomas W.	VP	
Frederick, Elizabeth A.	VP	
Hartman, Phillip A.	VP	
Henderson, Matthew P.	VP	
Hopper, David A.	VP	1700 Magnavox Way, Ft Wayne, In 46804
Keefer, J. Michael	VP	200 East Berry St., Ft Wayne, In 46802
Keller, Donald E.	VP	
Kissko, Lawrence T.	VP	200 East Berry St., Ft Wayne, In 46802
Martin, Edward B.	VP	
McWhorter, John R.	VP	1700 Magnavox Way, Ft Wayne, In 46804
Miller, Reed P.	VP	
Nichols, Oliver H. G.	VP	
Nine, Ernest D.	VP	
Page, Arthur L.	VP	
Prosser, Raymond L.	VP	

Roesler, Max A.	VP/T	
Ross, Arthur S.	VP	
Rowland, Lawrence T.	VP	1700 Magnavox Way, Ft Wayne, 46804
Schibley, James V.	VP	1700 Magnavox Way, Ft Wayne, 46804
Steinkamp, John L.	VP	
Trumble, Casey J.	VP	200 East Berry St., Fort Wayne, In 46802
Tunis, James A.	VP	1700 Magnavox Way, Ft Wayne, 46804
Whitney, Janet C.	VP	1700 Magnavox Way, Ft Wayne, 46804
Wilkins, Michael D.	VP	
Worthington, O. Douglas	VP/C	
Womack, C. Suzanne	S	200 East Berry St., Fort Wayne, In 46802
Byrde, Michelle L.	AS	
McMeekin, H. Thomas	D	200 East Berry St., Fort Wayne, In 46802
Rolland, Ian M.	D	200 East Berry St., Fort Wayne, In 46802
Vaughan, Richard C.	D	200 East Berry St., Fort Wayne, In 46802

P - President; EVP - Executive Vice President; SVP - Senior Vice President;
VP - Vice President; T - Treasurer; S - Secretary; C - Controller;
AS - Assistant Secretary; CH - Chairman of the Board; CEO - Chief Executive
Officer; COO - Chief Operating Officer; D - Director

* All address left blank are: 1300 South Clinton St., Fort Wayne, IN 46802