

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 805087

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** THE LINCOLN NATIONAL LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

1300 SOUTH CLINTON STREET  
FT. WAYNE, IN 468023506

**New Principal Place of Business:**

1300 SOUTH CLINTON STREET  
FT. WAYNE, IN 46802

**Current Mailing Address:**

1300 SOUTH CLINTON STREET  
2H41  
FT. WAYNE, IN 468023506

**New Mailing Address:**

1300 SOUTH CLINTON STREET  
FT. WAYNE, IN 46802

**FEI Number:** 35-0472300

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GLASS, DENNIS R  
Address: 150 RADNOR CHESTER ROAD  
City-St-Zip: RADNOR, PA 19087

Title: S  
Name: BRAWLEY, CHARLES A III  
Address: 150 N. RADNOR CHESTER ROAD  
City-St-Zip: RADNOR, PA 19087

Title: T  
Name: BHALLA, ANANT  
Address: 150 N. RADNOR CHESTER ROAD  
City-St-Zip: RADNOR, PA 19087

Title: VP  
Name: KATTMANN, KRISTINE M  
Address: 1300 SOUTH CLINTON STREET  
City-St-Zip: FORT WAYNE, IN 46802

Title: D  
Name: RYAN, KEITH J  
Address: 1300 SOUTH CLINTON STREET  
City-St-Zip: FORT WAYNE, IN 46802

Title: D  
Name: CORNELIO, CHARLES C  
Address: 100 NORTH GREENE STREET  
City-St-Zip: GREENSBORO, NC 27401

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANANT BHALLA

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04/21/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date