## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## **DOCUMENT # 805274**

1. Entity Name



**FILED** Apr 06, 2004 8:00 am Secretary of State

04-06-2004 90028 028 \*\*\*150.00

STANDARD LIFE INSURANCE COMPANY OF INDIANA								
Principal Place of Business 10689 N PENNSYLVANIA ST INDIANAPOLIS IN 46280 US		Mailing Address 10689 N PENNSYLVANIA ST INDIANAPOLIS IN 46280 US						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			MOORE CR2E034 (11/03)			
City & State		City & State			4. FEI Number 35-0679520	<b>→</b>	Applied For Not Applicable	
Zip	Country	Zip C	Country			□ \$8.75 A Fee Requi		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
ONE CHANGAL OFFICE				Name				
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST			Street Ac	ldress (P.	O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32399-0000							Į	
			City		1986	FL Zip Co	ode	
8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE								
Secretaria management	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	sisiered Ageni signatur	re required w	hen reinstating)	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State.					Election Campaign Financ     Trust Fund Contribution.		.00 May Be led to Fees	
10.	· OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 11	
TITLE	D	☐ Delete	TITLE	PID		Change	e 🔀 Addition	
NAME	PHEFFER, PAUL B		NAME	ALTE A	buotney, Marc D. I N. Pernsylvania st		j	
STREET ADDRESS	10689 N PENNSYLVANIA ST		STREET ADDRESS CITY-ST-ZIP	70635	1			
CITY-ST-ZIP	INDIANAPOLIS IN 46280		<del></del>	- Noria	rapolis, In 46280			
TITLE NAME	D TODD, DAVID L	🔀 Delete	TITLE NAME	Carre	stophen M.	☐ Changi	e 🔀 Addition	
STREET ADDRESS	10689 N PENNSYLVANIA ST		STREET ADDRESS	10686	stephen M. IN. Punsylvania St		,	
CITY-ST-ZIP	INDIANAPOLIS IN 46280		CITY-ST-ZIP	India	narolis IN 46280			
TITLE	VT	☐ Delete	TITLE	VID	ta Michael A.	Change	e 💹 Addition	
NAME	HOCHGESANG, GERALD R		NAME	Quera	ta Michael A			
CITY-ST-ZIP			STREET ADDRESS' CITY-ST-ZIP	(842	1 10' LOUIDA LONGIAC >	<u></u>		
	INDIANAPOLIS IN 46280	M pulu	<del></del>	India N	napolis, IN 46280	Change	o EM Addition	
TITLE NAME	STAHL, EDWARD T	🔀 Delete	TITLE NAME	Kniese	ur, Martial R	☐ Change	e 🔀 Addition	
STREET ADDRESS	10689 N PENNSYLVANIA ST		STREET ADDRESS	10689	IN. Remarkania St			
CITY-ST-ZIP	INDIANAPOLIS IN 46280		CITY-ST-ZIP	Indi.	mapplis IN 46280			
TITLE	CD	☐ Delete	TITLE		• •	☐ Chang	e 🔲 Addition	
NAME .	HUNTER, RONALD D 10689 N PENNSYLVANIA ST		NAME STREET ADDRESS		•			
STREET ADDRESS CITY-ST-ZIP	INDIANAPOLIS IN 46280		STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Chang	e 🔲 Addition	
NAME		L Doroto	NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED WAME OF SIGNING OFFICER OR DIRECTOR

Gerald

317-574-6200

Daytime Phone #