

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 807384

FILED
Feb 13, 2003
Secretary of State

Entity Name: PRINCIPAL LIFE INSURANCE COMPANY

Current Principal Place of Business:

C/O CAROL LEVINE
711 HIGH STREET
DES MOINES, IA 503920306 US

New Principal Place of Business:

C/O CAROL LEVINE
711 HIGH STREET
DES MOINES, IA 503920306 US

Current Mailing Address:

C/O CAROL LEVINE
711 HIGH STREET
DES MOINES, IA 503920306 US

New Mailing Address:

C/O CAROL LEVINE
711 HIGH STREET
DES MOINES, IA 503920306 US

FEI Number: 42-0127290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INSURANCE COMMISSIONER OF FLA.
101 E. GAINES ST., FLETCHER BLDG., RM. 524
CAPITOL BUILDING
TALLAHASSEE, FL 32399 US

Name and Address of New Registered Agent:

INSURANCE COMMISSIONER OF FLA.
200 EAST GAINES STREET
TALLAHASSEE, FL 323990300 US

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: _____

02/13/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: VS () Delete
Name: HOFFMAN, JOYCE N.,
Address: 711 HIGH ST
City-St-Zip: DES MOINES, IA 50392

Title: D () Delete
Name: DRURY, D.J.
Address: 711 HIGH ST.
City-St-Zip: DES MOINES, IA 50392

Title: CCEO () Delete
Name: GRISWELL, J. BARRY
Address: 711 HIGH STREET
City-St-Zip: DES MOINES, IA 503920306

Title: D () Delete
Name: BERNARD, BETSY J
Address: 711 HIGH STREET
City-St-Zip: DES MOINES, IA 50392

Title: D () Delete
Name: CARTER-MILLER, JOCELYN
Address: 711 HIGH STREET
City-St-Zip: DES MOINES, IA 50392

Title: EVP () Delete
Name: DALEY, MICHAEL T
Address: 711 HIGH ST
City-St-Zip: DES MOINES, IA 50392

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VS (X) Change () Addition
Name: HOFFMAN, JOYCE N
Address: 711 HIGH ST
City-St-Zip: DES MOINES, IA 50392

Title: D (X) Change () Addition
Name: DRURY, DAVE J
Address: 711 HIGH ST.
City-St-Zip: DES MOINES, IA 50392

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOYCE N. HOFFMAN

VS

02/13/2003

Electronic Signature of Signing Officer or Director

Date

CRAIG L. BASSETT, VP/T
711 HIGH STREET
DES MOINES, IA 50392

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DES MOINES, IA 50392

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