2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

830791 DOCUMENT

1. Entity Name

| HUNACE MAININ SERVICE CONFORATION | | | | / | | |
|---|---|--|-----------------------------------|---|--------------------------------|--|
| Principal Place of Business #1-HORACE MANN PLAZA ATTN: TAX DEPT. SPRINGFIELD IL | | Mailing Address #1-HORACE MANN PLAZA ATTN: TAX DEPT. SPRINGFIELD IL | | | 2/2/1 2/2/1 2/2/1 2/2/1 1/2/1 | |
| 2. Principal f | Place of Business | 3. Mailing Address | | | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | ☐ CHECK HERE IF MAKING C | HANGES | |
| City & Sta | te | City & State | | 4. FEI Number 37-0972590 | Applied For Not Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired \$8 | 8.75 Additional se Required | |
| | 6. Name and Address of Current | t Registered Agent | | 7. Name and Address of New Registered Age | | |
| | | | Name | | | |
| | ATION SERVICE COMPANY | | Street Address | s (P.O. Box Number is Not Acceptable) | | |
| | 'S STREET | | | | | |
| TALLAHA | SSEE FL 32301 | | | | | |
| • | | | City | FL | Zip Code | |
| | | or the purpose of changing its re | egistered office or regist | tered agent, or both, in the State of Florida. I am fam | niliar with, and accept | |
| the obligat | tions of registered agent, . | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent | A LOTE O | | red when reinstating) DATE | | |
| | | (NOTE: F | Registered Agent signature requir | DATE DATE | | |
| Afte | ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o | of State | | 9. Election Campaign Financing Trust Fund Contribution. | \$5.00 May Be Added to Fees | |
| 10. See | ATTACHED LESTICERS AND | DIRECTORS | 11. | ADDITIONS/CHANGES TO OFFICERS AND DI | RECTORS IN 11 | |
| TITLE | DV : | ☐ Delete | TITLE | | ☐ Change ☐ Addition | |
| NAME STREET ADDRESS | HECKMAN, PETER H 1 HORACE MANN PLAZA | | NAME STREET ADDRESS | | | |
| CITY-ST-ZIP | SPRINGFIELD !L | | CITY-ST-ZIP | | | |
| TITLE | AV | ☐ Delete | TITLE | | Change Addition | |
| NAME | BARNETT, DIANE M. | | NAME | | | |
| STREET ADDRESS CITY-ST-ZIP | 1 HORACE MANN PLAZA | | STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE | SPRINGFIELD IL | Delete - | TITLE | | Change Addition | |
| NAME | v Inkel, H. Albert | Delete | NAME | | J Change | |
| STREET ADDRESS | 1 HORACE MANN PLAZA | | STREET ADDRESS | | | |
| CITY-ST-ZIP | SPRINGFIELD IL | | CITY-ST-ZIP | | | |
| TITLE | V | Delete | TITLE | | Change | |
| NAME STREET ADDRESS | ARISMAN, A. THOMAS | • | NAME STREET ADDRESS | | | |
| CITY-ST-ZIP | 1 HORACE MANN PLAZA SPRINGFIELD IL | | CITY-ST-ZIP | • | | |
| TITLE | DVS | □ Delete | TITLE | | Change Addition | |
| NAME | CAPARROS, ANN M. | | NAME | _ | , , _ | |
| STREET ADDRESS | 1 HORACE MANN PLAZA | | STREET ADDRESS | | ł | |
| CITY-ST-ZIP | Springfield IL | | CITY-ST-ZIP | | | |
| TITLE Name | PD | ☐ Delete | TITLE | - [| Change | |
| | LOWER, LOUIS G 1 HORACE MANN PLAZA | | NAME STREET ADDRESS | | | |

FILED Apr 22, 2003 8:00 am Secretary of State



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.

CITY-ST-ZIP

SPRINGFIELD IL

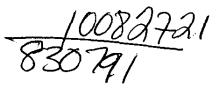
CITY-ST-ZIP

Waru Barners EQUIR Diane Barnett APR 15 2003

217-788-5385

AHachment#

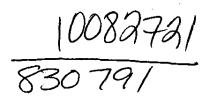
HORACE MANN SERVICE CORPORATION FLORIDA CORPORATION ANNUAL REPORT OFFICERS & DIRECTORS LISTING As Of March 27, 2003



| TITLE | NAME | OFFICE ADDRESS |
|-------|-----------------------|---|
| D/P/C | LOWER II, LOUIS G. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| D/V | HECKMAN, PETER H. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| D/V | JENSEN, DANIEL M. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| D/V | REYNOLDS, DOUGLAS W. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| D/V | ZOCK, GEORGE J. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| D/V/S | CAPARROS, ANN M. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| D/V | CHRISMAN, VALERIE A. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | CONKLIN, BRET A. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | HALLMAN, DWAYNE D. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | HINKLE, WILLIAM S. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | JOYNER, ROBERT B. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V/AS | ARMSTEAD, RHONDA R. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V/T | CHRISTIAN, ANGELA S. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | KRETCHMAR, DEBORAH F. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |



HORACE MANN SERVICE CORPORATION FLORIDA CORPORATION ANNUAL REPORT OFFICERS & DIRECTORS LISTING As Of March 27, 2003



| TITLE | NAME | OFFICE ADDRESS |
|-------|-------------------------|---|
| V | FEHR, CHRISTOPHER M. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | KARR, KATHRYN E. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | ANDREWS, PAUL D. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | BIANCHI, DENNIS E. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | BRAUN, JANN M. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | HUBBARD, KELVIN R. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | MeNULTY, KATHLEEN A. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | MEYER, JOHN C. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | MITCHELL, HARRY L. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | QUALLS, JACOB E. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | ROBERTS JR., LEONARD C. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | SCHULENBURG, RICHARD R. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |
| V | TITONE, PETER M. | #1 HORACE MANN PLAZA SPRINGFIELD, IL 62715 |

Attachment#

HORACE MANN SERVICE CORPORATION FLORIDA CORPORATION ANNUAL REPORT OFFICERS & DIRECTORS LISTING As Of March 27, 2003

10082721

| TITLE | NAME | OFFICE ADDRESS | |
|-------|--------------------|-----------------------|---|
| | | | |
| AV | BARNETT, DIANE | #1 HORACE MANN PLAZA | |
| | | SPRINGFIELD, IL 62715 | |
| AV | HUGHES, WILLIAM R. | #1 HORACE MANN PLAZA | |
| | | SPRINGFIELD, IL 62715 | |
| AV | SEIFERT, TRICIA L. | #1 HORACE MANN PLAZA | |
| | | SPRINGFIELD, IL 62715 | - |
| AS | SACCO, LINDA L. | #1 HORACE MANN PLAZA | |
| | | SPRINGFIELD, IL 62715 | |