FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 848171 (5)

1. Corporate Name

CENTRAL RESERVE LIFE INSURANCE COMPANY

Principal Place of Business:
CRL PLAZA
17800 ROYALTON ROAD
STRONGSVILLE OH 44136-5197

Mailing Address:
CRL PLAZA
17800 ROYALTON ROAD
STRONGSVILLE OH 44136-5197

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business | 2a. Mailing Address

3. Date Incorporated or Qualified: 02/04/1981
3a. Date of Last Report: 05/01/1994
4. FEI Number: 34-0970995 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This Corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STATE INSURANCE COMMISSIONER OF FLORIDA
THE CAPITOL BUILDING
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable):
City: FL 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 office 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 Sections 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip
P	LICK, FRED, JR.	17800 ROYALTON ROAD	STRONGSVILLE OH
VT	GRIMONE, FRANK W.	17800 ROYALTON ROAD	STRONGSVILLE OH
V	LARKIN, MARY ELLEN	17800 ROYALTON ROAD	STRONGSVILLE OH
S	STANDISH, LINDA S.	17800 ROYALTON ROAD	STRONGSVILLE OH
VP	KUSNIC, RICHARD A.	17800 ROYALTON RD.	STONGSVILLE OH

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (☐ Change ☐ Addition)

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard A. Kusnic — Richard A Kusnic 5/3/95 (216)572-2400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

0466370 FP