

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90490 045 ***150.00

DOCUMENT # 853127

1. Entity Name

ANNUITY INVESTORS LIFE INSURANCE COMPANY

Principal Place of Business

Mailing Address

250 EAST FIFTH STREET
 CINCINATI OH 45202
 US

250 EAST FIFTH STREET
 CINCINATI OH 45202
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **31-1021738**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STATE INSURANCE COMMISSIONER
 THE CAPITOL
 TALLAHASSEE FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ADAMS, ROBERT A 250 E. FIFTH STREET CINCINATI OH 45202	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KASPROWICZ, BETTY M 250 E. FIFTH STREET CINCINATI OH 45202	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LASWELL, LYNN E 250 E. FIFTH STREET CINCINATI OH 45202	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MORTENSEN, JAMES M 250 E. FIFTH STREET CINCINATI OH 45202	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MANEY, WILLIAM J 250 E. FIFTH STREET CINCINATI OH 45202	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Muething, Mark F. 250 E. Fifth Street Cincinnati, OH 45202	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Caprio, Teresa C. 250 E. Fifth Street Cincinnati, OH 45202	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Liguzinski, Thomas K. 250 E. Fifth Street Cincinnati, OH 45202	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Schepers, Charles R. 250 E. Fifth St. Cincinnati, OH 45202	☐ Change ☒ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: *Teresa Caprio*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Teresa C. Caprio

3/9/01

Date

513-357-3300

Daytime Phone #

CR2E034 (10/00)

Attachment Doc # 853127
CO035052

FLORIDA

ANNUITY INVESTORS LIFE INSURANCE COMPANY (#93661)
OFFICERS AND DIRECTORS CONTINUED
December 31, 2000

OFFICERS

DIRECTORS

V	John P. Gruber	Stephen C. Lindner
V	Michael J. O'Connor	William Jack Maney II
V	# Richard L. Sutton	
V	Vincent J. Granieri	
V/D		

The address for all of the above is: 250 East Fifth Street
Cincinnati, Ohio 45202

Indicates New Officer