

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16906

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: CONTINENTAL LIFE INSURANCE COMPANY OF BRENTWOOD, TENNESSEE

**Current Principal Place of Business:**

101 CONTINENTAL  
BRENTWOOD, TN 37027

**New Principal Place of Business:**

101 CONTINENTAL PLACE  
BRENTWOOD, TN 37027

**Current Mailing Address:**

P.O. BOX 1188  
BRENTWOOD, TN 37024

**New Mailing Address:**

FEI Number: 62-1181209      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: OLSON, CHRISTOPHER M  
Address: 101 CONTINENTAL PLACE  
City-St-Zip: BRENTWOOD, TN 37027

Title: CFO ( ) Delete  
Name: STEWART, BRIAN C  
Address: 101 CONTINENTAL PLACE  
City-St-Zip: BRENTWOOD, TN 37027

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SEC ( ) Change (X) Addition  
Name: HENDRICH, STEVEN L  
Address: 101 CONTINENTAL PLACE  
City-St-Zip: BRENTWOOD, TN 37027

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVEN L. HENDRICH

SEC

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date