## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#812227**

FILED Mar 05, 2010 Secretary of State

Entity Name: AMERITAS LIFE INSURANCE CORP.

Current Principal Place of Business: New Principal Place of Business:

5900 O STREET

LINCOLN, NE 68510 US

Current Mailing Address: New Mailing Address:

P. O .BOX 81889

LINCOLN, NE 685011889 US

FEI Number: 47-0098400 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST

TALLAHASSEE, FL 323990000 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PCEO

Name: MARTIN, JOANN M Address: 5900 O STREET City-St-Zip: LINCOLN, NE 68510 US

Title: VT

Name: LESTER, WILLIAM W
Address: 390 NORTH COTNER BLVD
City-St-Zip: LINCOLN, NE 68505 US

Title: VCFO

 Name:
 BARTH, ROBERT C

 Address:
 5900 O STREET

 City-St-Zip:
 LINCOLN, NE 68510 US

Title: VS

 Name:
 CONNOLLY, JAN M

 Address:
 5900 O STREET

 City-St-Zip:
 LINCOLN, NE 68510 US

Title: SVP

 Name:
 O'TOOLE, KEVIN W

 Address:
 1876 WAYCROSS ROAD

 City-St-Zip:
 CINCINNATI, OH 45240 US

Title: SVP

Name: SANDS, ROBERT-JOHN H Address: 7315 WISCONSIN AVENUE City-St-Zip: BETHESDA, MD 20814 US

I hereby 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 all other like empowered.

SIGNATURE: JAN M. CONNOLLY VS 03/05/2010