2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#814185

FILED Mar 01, 2011 Secretary of State

Entity Name: SECURITY LIFE OF DENVER INSURANCE COMPANY

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

1290 BROADWAY DENVER, CO 802035601

Current Mailing Address: New Mailing Address:

20 WASHINGTON AVE S ROUTE 1226 MINNEAPOLIS, MN 55401

FEI Number: 84-0499703 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 32399 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.

III the State of Florid

SIGNATURE: Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title:

Name: BENNER, JOY

Address: 20 WASHINGTON AVE SOUTH City-St-Zip: MINNEAPOLIS, MN 55401

Title: DCFO

Name: STEENBERGEN, EWOUT Address: 230 PARK AVENUE City-St-Zip: NEW YORK, NY 10169

Title: P/D

Name: BRITTON, DONALD W

Address: 20 WASHINGTON AVENUE SOUTH

City-St-Zip: MINNEAPOLIS, MN 55401

Title: [

Name: LEARY, ROBERT G
Address: 230 PARK AVENUE
City-St-Zip: NEW YORK, NY 10169

Title: AS

Name: NELSON, TINA M

Address: 20 WASHINGTON AVE. SOUTH City-St-Zip: MINNEAPOLIS, MN 55401

Title: TSVP

Name: PENDERGRASS, DAVID S Address: 5780 POWERS FERRY RD NW

City-St-Zip: ATLANTA, GA 30327

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: TINA NELSON AS 03/01/2011