

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816757

Entity Name: THE CHESAPEAKE LIFE INSURANCE COMPANY**Current Principal Place of Business:**9151 BOULEVARD 26
NORTH RICHLAND HILLS, TX 76180**Current Mailing Address:**9151 BOULEVARD 26
NORTH RICHLAND HILLS, TX 76180 US**FEI Number:** 52-0676509**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 E GAINES ST
TALLAHASSEE, FL 32399-0000 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**Officer/Director Detail :**

Title	C, P, CEO, DIRECTOR
Name	FASOLA, KENNETH J
Address	9151 BOULEVARD 26
City-State-Zip:	NORTH RICHLAND HILLS TX 76180

Title	S
Name	SIMPSON, PEGGY G
Address	9151 BOULEVARD 26
City-State-Zip:	NORTH RICHLAND HILLS TX 76180

Title	EVP, CFO, DIRECTOR
Name	DONOVAN, R SCOTT
Address	9151 BOULEVARD 26
City-State-Zip:	NORTH RICHLAND HILLS TX 76180

Title	SVP, DIRECTOR
Name	BIERMAN, RICHARD E
Address	9151 BOULEVARD 26
City-State-Zip:	NORTH RICHLAND HILLS TX 76180

Title	EVP, T, DIRECTOR
Name	DUKE, DERRICK A
Address	9151 BOULEVARD 26
City-State-Zip:	NORTH RICHLAND HILLS TX 76180

Title	DIRECTOR
Name	SMITH, MARK H
Address	9151 BOULEVARD 26
City-State-Zip:	NORTH RICHLAND HILLS TX 76180

Title	SVP
Name	PALACIOS, CONNIE
Address	9151 BOULEVARD 26
City-State-Zip:	NORTH RICHLAND HILLS TX 76180

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: PEGGY G SIMPSON**SECRETARY****02/09/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date