

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003980

Entity Name: KEMPER CORPORATE SERVICES, INC.**Current Principal Place of Business:**ONE EAST WACKER DRIVE
CHICAGO, IL 60601**Current Mailing Address:**ONE EAST WACKER DRIVE
CHICAGO, IL 60601 US**FEI Number:** 36-4105161**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 CHAIRMAN, PRESIDENT, & CEO
Name SOUTHWELL, DONALD G
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title SVP & GENERAL COUNSEL
Name RENWICK, SCOTT
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title SVP & CFO
Name SODARO, FRANK J
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title VP
Name SANDELSKI, DENNIS
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title VP
Name BOSCHELLI, JOHN M
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title VP
Name KING, LISA M
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title VP & CORPORATE ACTUARY
Name GRECO, RONALD E
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title VP
Name HICKERT-HILL, DIANA J
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Continues on page 2

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: C. THOMAS EVANS, JR.**SECRETARY****03/21/2014**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP & CHIEF RISK OFFICER
Name JANNAH, SHEKAR
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title VP & CHIEF ACCOUNTING OFFICER
Name ROESKE, RICHARD
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title SECRETARY
Name EVANS, JR., C. THOMAS
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title VP & TREASURER
Name MOSES, CHRISTOPHER L
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title VP
Name SCHULTZ, EDWIN P
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601

Title CHIEF INFORMATION OFFICER
Name CRAWFORD, SHAWN R
Address ONE EAST WACKER DRIVE
City-State-Zip: CHICAGO IL 60601