

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16906

**FILED**  
**Apr 06, 2017**  
**Secretary of State**  
**CC5138099703**

**Entity Name:** CONTINENTAL LIFE INSURANCE COMPANY OF BRENTWOOD,  
TENNESSEE

**Current Principal Place of Business:**

800 CRESCENT CENTRE DRIVE  
SUITE 200  
FRANKLIN, TN 37067

**Current Mailing Address:**

151 FARMINGTON AVENUE  
RW61  
HARTFORD, CT 06156 US

**FEI Number: 62-1181209**

**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:** CFO

04/06/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            WOOLDRIDGE, TYREE SCOTT  
Address        800 CRESCENT CENTRE DRIVE  
                 SUITE 200  
City-State-Zip: FRANKLIN TN 37067

Title            SECRETARY, DIRECTOR  
Name            HENDRICH, STEVEN LOUIS  
Address        800 CRESCENT CENTRE DRIVE  
                 SUITE 200  
City-State-Zip: FRANKLIN TN 37067

Title            VICE PRESIDENT AND TREASURER  
Name            MARONEY, JOHN PATRICK  
Address        800 CRESCENT CENTRE DRIVE  
                 SUITE 200  
City-State-Zip: FRANKLIN TN 37067

Title            VICE PRESIDENT AND ASSISTANT  
                 SECRETARY  
Name            LEE, EDWARD CHUNG-I  
Address        800 CRESCENT CENTRE DRIVE  
                 SUITE 200  
City-State-Zip: FRANKLIN TN 37067

Title            DIRECTOR  
Name            SHELTON, BRAD EVERETT  
Address        800 CRESCENT CENTRE DRIVE  
                 SUITE 200  
City-State-Zip: FRANKLIN TN 37067

*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:** EDWARD CHUNG-I LEE

**ASSISTANT SECRETARY**    04/06/2017

Electronic Signature of Signing Officer/Director Detail

Date