

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 811341

FILED  
Apr 06, 2010  
Secretary of State

**Entity Name:** CONSTITUTION LIFE INSURANCE COMPANY

**Current Principal Place of Business:**

1001 HEATHROW PARK LANE, STE 5001  
LAKE MARY, FL 32746 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 958465  
LAKE MARY, FL 327958465 US

**New Mailing Address:**

**FEI Number:** 36-1824600      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CHIEF FINANCIAL OFFICER  
P O BOX 6200 (32314-6200)  
200 E. GAINES ST  
TALLAHASSEE, FL 323990000 US

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

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: DP  
Name: ISRAEL, JASON  
Address: 1001 HEATHROW PARK LANE, STE 5001  
City-St-Zip: LAKE MARY, FL 32746

Title: DEVP  
Name: SQUAROK, JOHN  
Address: 1001 HEATHROW PARK LANE, STE 5001  
City-St-Zip: LAKE MARY, FL 32746

Title: DEVP  
Name: WAEGELEIN, ROBERT A  
Address: 6 INTERNATIONAL DR SUITE 190  
City-St-Zip: RYE BROOK, NY 10573

Title: VPS  
Name: CARLTON, STEVE  
Address: 1001 HEATHROW PARK LANE, STE 5001  
City-St-Zip: LAKE MARY, FL 32746

Title: VP  
Name: COCHRANE, CARL L  
Address: 1001 HEATHROW PARK LANE, STE 5001  
City-St-Zip: LAKE MARY, FL 32746

Title: SVP  
Name: KILIAN, THOMAS J  
Address: 1001 HEATHROW PARK LANE, SUITE 5001  
City-St-Zip: LAKE MARY, FL 32746

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: STEVE CARLTON

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

SEC

04/06/2010

\_\_\_\_\_ Date